



Commodity Supplemental Food Program



Policy and Procedure Manual



COMMODITY SUPPLEMENTAL FOOD PROGRAM

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POLICY SUMMARY

- 1.1 The Missouri Commodity Supplemental Food Program (CSFP) shall be administered in accordance with federal regulations, the State Plan, the contract Scope of Work (SOW) and the Policy and Procedure Manual.
- 1.2 The definitions in the federal regulation and herein shall be used when administering the Missouri Commodity Supplemental Food Program.
- 1.3 The acronyms herein will be used throughout this manual and in connection with administering the Missouri CSFP. Acronyms not defined herein must be defined at least the first time it appears in any document.
- 2.1 Local contractor staff or trained subcontracting agency personnel shall certify that each applicant is eligible prior to the issuance of program benefits.
- 2.2 The local agency shall determine categorical eligibility in accordance with federal regulation.
- 2.3 Person's eligible for Missouri's CSFP must reside in Missouri, within the normal service area of the local agency or distribution site. There are no duration or fixed residency requirements. Migrant and seasonal farm workers are considered as meeting the residency requirement.
- 2.4 The local agency shall use the definition of income established in the federal regulations.
- 2.5 The local agency shall not count as income anything excluded by federal regulations.
- 2.6 When the maximum caseload is reached the contractor or subcontractor shall implement a waiting list in accordance with federal regulation.
- 2.7 At the time of certification and re-certification, applicants are informed that they have a right to a fair hearing and that they may appeal any decision made by the local agency regarding denial or termination from the CSFP.
- 2.8 Program benefits shall be base upon certifications established in accordance with the time frames designated by federal regulation.
- 2.9 Every participant who intends to relocate during the certification period shall be issued a Verification of Certification form, Attachment 2.8. Local agencies and



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- their subcontractors will accept Verification of Certification forms from other CSFP agencies in accordance with federal regulation and this policy.
- 2.10 Local agencies in conjunction with the Department are responsible for the detection and prevention of dual participation.
 - 3.1 Assigning and management of caseload will be accomplished in accordance with federal regulations.
 - 3.2 To remain enrolled in the Commodity Supplemental Food Program, persons may fail to pick-up food during no more than two consecutive months.
 - 3.3 Outreach activities shall be conducted at both the State and local agency level.
 - 3.4 Local agencies shall make arrangements to meet the needs of homebound elderly.
 - 4.1 Nutrition education shall be thoroughly integrated into Program operations.
 - 4.2 Local agencies shall distribute the Food Program Survey in accordance with State Agency guidance.
 - 5.1 The State agency manages the multi-food ordering process for the Commodity Supplemental Food Program. The local agencies order, receive and warehouse the foods.
 - 5.2 The State agency manages the direct shipment food ordering process for the Commodity Supplemental Food Program. The local agencies order, receive and warehouse the foods.
 - 5.3 Local agency shall assemble food packages in accordance with Missouri Department of Health and Senior Services CFSP Food Package Monthly Distribution Rates (Attachment 5.3) and program regulations.
 - 5.4 Local agency shall assure that supplemental food packages are distributed in accordance with Program regulations.
 - 5.5 Local agency staff members are responsible for maintaining a system that will account for all foods received and distributed, in accordance with Program regulations and for submitting required reports.
 - 6.1 Each local agency that contracts with the Missouri Department of Health and Senior Services will be monitored for compliance with Program regulations.



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- 6.2 All local agency staff, volunteers and sub-agency staff shall receive appropriate training at least annually to assure that issuance of supplemental food is in accordance with FNS food package instructions and Program regulations. There shall be an evaluation component of such training and a mechanism for trainees to provide input.
- 7.1 Local agencies, participants and other interested parties may provide input and ideas for subsequent state plans on an on-going basis and during the annual period for public comment.
- 7.2 The State Plan will be written in accordance with guidelines provided by the USDA regional office and the federal regulation.
- 8.1 There will be accurate, current and complete disclosure of the financial status of the Program in accordance with federal regulations.
- 8.2 Funds provided to local agencies may be used to cover administrative costs identified in 7 CFR Part 247, amendments thereto, and in accordance with circulars and regulations referred to within 7 CFR 247.
- 8.3 State and local agencies shall maintain accurate and complete records in accordance with federal and state regulations and policies and the contract scope of work.
- 9.1 Local agencies shall report, process and resolve complaints about supplemental foods in accordance with federal regulation.
- 10.1 In compliance with federal regulations, all CSFP local agencies and the State Agency will be audited on an annual basis.
- 11.1 State and local agencies will comply with Title VI of the Civil Rights Act of 1964 (P.L.88-352) and all requirements imposed by federal and state regulations.
- 12.1 Individuals have a right to a fair hearing and may appeal any decision made by the local agency regarding denial or termination from the CSFP.
- 12.2 Local agencies have a right to appeal any action by the State with monetary consequences.



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Chapter 1.

Program Administration

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	Definitions.....	1.2
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SUBJECT:	Program Administration	Chapter:	1
		Section:	1.1
REFERENCES:	7 CFR 247.6	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To outline the regulatory and procedural guidelines for administering CSFP.

POLICY: The Missouri Commodity Supplemental Food Program (CSFP) shall be administered in accordance with federal regulations, the State Plan, the contract Scope of Work (SOW) and the Policy and Procedure Manual.

PROCEDURES:

- A. The CSFP is defined in Title 7 – Agriculture, Code of Federal Regulations Chapter II – Food and Nutrition Service, Department of Agriculture, Part 247 referred to here after as 7 CFR 247. Local Agencies shall comply with all applicable parts of this and related federal regulations. Regulations are available at <http://www.fns.usda.gov/fdd/regs/final-rules.htm>
- B. Food Distribution National Policy Memoranda issued about the CSFP serve to clarify the regulation and provide guidelines. Local Agencies shall comply with all Food Distribution National Policy Memoranda. Policy Memoranda are available at: <http://www.fns.usda.gov/fdd/policy/csfp-policies.htm>
- C. The Missouri State Plan, here after referred to as the Plan, describes how the Missouri Department of Health and Senior Services administers the CSFP. The plan and any amendments to the plan are approved by the Food and Nutrition Service of the Department of Agriculture prior to implementation. Local Agencies shall be familiar and comply with the Plan. Local Agencies are encouraged to provide input on the plan at any time and especially during the annual public comment period. See Policy and Procedures Section 7.1 State Planning – Public Comment.
- D. The contract SOW is the written agreement between the State and the Local Agency detailing the responsibilities of both parties.
- E. This reference, Commodity Supplemental Food Program Policy and Procedure Manual, interprets and defines federal regulations, policy memoranda and the Plan providing for consistency of implementation of the Missouri CSFP. Attachment 1.1 describes the Missouri CSFP.



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SUBJECT: Definitions	Chapter: 1
	Section: 1.2
REFERENCES: 7 CFR 247.2	Page: 1 of 2
	Revised: 8-12-04

PURPOSE: To provide standard definition for terms used in the administration of the Missouri Commodity Supplemental Food Program.

POLICY: The definitions in the federal regulation and herein shall be used when administering the Missouri Commodity Supplemental Food Program.

PROCEDURES:

Administrative costs: those direct and indirect costs which the Department and Contractors determine to be necessary to support Program operations, as defined in 7 C.F.R. Sec. 247.11.

Breastfeeding women: women up to one year postpartum who are breastfeeding their infants.

Caseload: monthly average number of persons a Contractor is authorized to serve over a specified period of time.

Categorical ineligibility: persons who do not meet the definition of pregnant women, breastfeeding women, postpartum women, infants, children, or elderly persons.

Certification: the use of criteria and procedures to assess and document each applicant's eligibility for the Program.

Children: persons who are at least one year of age but have not reached their sixth birthday.

Commodity Supplemental Food Program (CSFP): See Attachment 1.1.

Contractor: a public or private nonprofit agency, which enters into an agreement with the State agency to administer the Program at the local level. A Contractor determines the eligibility of applicants, distributes supplemental food and provides nutrition education to low-income persons, either directly or through another agency with which it has entered into a written agreement.

Distributing agency: a sub-contracting agency, which has entered into an agreement with a Contractor for the distribution of commodities.

Dual participation: simultaneous participation by an individual in the CSFP in more than one local agency or distribution site, or simultaneous participation in the CSFP and in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).



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SUBJECT: Definitions	Chapter: 1
	Section: 1.2
REFERENCES: 7 CFR 247.2	Page: 2 of 2
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Elderly persons: persons 60 years of age and older.

Homebound elderly persons: persons who are, in the judgment of the Contractor, unable to obtain monthly food packages without assistance provided by or through the Contractor.

Infants: persons under one year of age.

No-show participants: enrolled persons who fail to pick-up food during a month.

Nonprofit agency: a private agency, which is exempt from income tax under the Internal Revenue Code of 1954, as amended.

Participants: pregnant women, breastfeeding women, postpartum women, infants, children and elderly persons who are receiving supplemental foods under the Program.

Participation: the number of persons who have received supplemental foods through the Program in the reporting period.

Postpartum Woman: a woman who is up to 12 months past termination of her pregnancy as verified by a birth certificate, hospital record of birth, a newspaper notice of birth, or a physician's notice of termination of pregnancy.

Pregnant Woman: woman determined to have one or more fetuses in utero as verified by visual observation or written note from a physician.

State agency: the Missouri Department of Health and Senior Services.

Supplemental foods: food donated by the U.S. Department of Agriculture (USDA) for use by eligible persons in low-income groups who are vulnerable to malnutrition.



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SUBJECT:	Acronyms	Chapter:	1
		Section:	1.3
REFERENCES:	7 CFR 247	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To define common acronyms relating to the administration of the CSFP.

POLICY: The acronyms herein will be used throughout this manual and in connection with administering the Missouri CSFP. Acronyms not defined herein must be defined at least the first time it appears in any document.

PROCEDURES:

The following acronyms will be used throughout this manual.

- CSFP: Commodity Supplemental Food Program.
- FNS: Food and Nutrition Service of the United States Department of Agriculture
- LA: Local Agency
- MDHSS: Missouri Department of Health and Senior Services
- MPRO: Mountain Plains Regional Office
- SA: State Agency
- SOW: Scope of Work
- USDA: United States Department of Agriculture or U.S. Department of Agriculture
- WIC: Supplemental Nutrition Program for Women, Infants and Children.

Missouri Commodity Supplemental Food Program (CSFP)

What is the CSFP?

The Missouri Commodity Supplemental Food Program (CSFP) works to improve the health of low-income pregnant and breastfeeding women, other new mothers up to one year postpartum, infants, children up to their sixth birthday, and older persons at least 60 years of age by supplementing their diets with nutritious USDA commodity foods. The Missouri Department of Health and Senior Services (MDHSS) administers the CSFP.

The population served by CSFP is similar to that served by USDA's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), but CSFP also serves older persons, and provides food packages rather than the vouchers that WIC participants receive. Eligible women, infants and children cannot participate in both programs at the same time.

CSFP food packages do not provide a complete diet, but rather are good sources of the nutrients typically lacking in the diets of the target population. These include vitamins A and C, calcium and iron.

How does the program operate?

USDA purchases food and makes it available to MDHSS along with funds for administrative costs. MDHSS distributes the food to public and non-profit private local agencies from the USDA distribution center in Carthage, Missouri. Local agencies determine the eligibility of applicants, distribute the foods, and provide nutrition education. Local agencies also provide referrals to other welfare, nutrition, and health care programs such as WIC, food stamps, Medicaid, and Medicare.

What are the requirements to get food through CSFP?

Women, infants, children, and the elderly must reside in the state of Missouri. Women, infants, and children must meet income eligibility requirements (currently 185 percent of the Federal Poverty Income Guidelines), while older persons must have income at or below 130 percent of the Federal Poverty Income Guidelines (currently \$16,237 annually for a family of two).

What foods are provided to participants?

Food packages include a variety of foods, such as non-fat dry milk, evaporated milk, juice, hot or ready-to-eat cereal, rice or pasta, peanut butter or dry beans or peas, canned meat or poultry or tuna or salmon or egg mix, and canned fruits and vegetables. Infants receive dehydrated iron-fortified infant formula and infant cereal.

For more information go to <http://www.dhss.mo.gov/csfp> or contact:

Janice Rambo, CSFP Program Manager
Community Food and Nutrition Assistance
Division of Community Health
Missouri Department of Health and Senior Services
P.O. Box 570
Jefferson City, MO 65102
1-800-733-6251



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Chapter 2. Certification

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SUBJECT: Certification	Chapter: 2
	Section: 2.1
REFERENCES: 7 CFR 247.7 and 247.8(d)(4)	Page: 1 of 2
	Revised: 8-12-04

PURPOSE: To provide guidance for the certification process and completion of the CSFP Participant Application, Attachment 2.1.

POLICY: Local contractor staff or trained subcontracting agency personnel shall certify that each applicant is eligible prior to the issuance of program benefits.

PROCEDURES:

- A. All certification data for each participant shall be recorded on the CSFP Participant Application, Attachment 2.1.
- B. Each applicant must meet the following requirements:
 1. Categorically eligible as an infant, child, pregnant, postpartum or breastfeeding woman, or elderly person. See Section 2.2.
 2. Meet residency requirements. See Section 2.3.
 3. For women, infants and children, household income at or below 185% of federal poverty income guidelines, or households that receive food stamps, Medicaid or Temporary Assistance or who are eligible under existing Federal, State or local food, health or welfare programs for low-income persons. See Attachment 2.2 and Sections 2.4 and 2.5.
 4. For elderly persons, household income at or below 130% of federal poverty income guidelines. See Attachment 2.2 and Sections 2.4 and 2.5.
- C. The following sentences appear on the application and must be read by, or read to, the applicant or the applicant's parent or caretaker, in the appropriate translation, at the time of certification:
 1. Standards for participation in the program are the same for everyone regardless of race, color, age, sex, disability, or national origin.
 2. You may appeal any decision made by the local agency regarding your denial or termination from the Program.
 3. If your application is approved, the local agency will make nutrition education available to you and you are encouraged to participate.



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SUBJECT: Certification	Chapter: 2
	Section: 2.1
REFERENCES: 7 CFR 247.7 and 247.8(d)(4)	Page: 2 of 2
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4. It is illegal to participate in both the CSFP and the WIC program, and it is illegal to participate in two different CSFP programs at the same time.
- D. At the time of certification, instructions provided to each applicant shall include the subject matter contained in Attachment 2.3, "The CSFP Food Package is" and Attachment 2.4, "Health and Social Services Referral Information." Key points on these handouts will be discussed with and copies provided to each applicant.
- E. When funding is not available to provide Program benefits to all applicants, the Contractor or trained subcontracting agency personnel must maintain a waiting list of individuals who apply for the Program. See Section 2.6 and Attachments 2.5 and 2.6.
- F. A person found ineligible for the Program during a certification visit shall be advised in writing of the ineligibility and of the right to a fair hearing. See Section 2.7 and Attachment 2.7.
- G. A person found ineligible at any time during the certification period shall be advised in writing 15 days before termination of eligibility of the reasons for ineligibility and of the right to a fair hearing. See Section 2.7 and Attachment 2.7.
- H. Each participant shall be notified at least 15 days before the expiration of each certification period that eligibility for the Program is about to expire.
- I. Each participant shall receive an explanation of how the Contractor's CSF food delivery system operates.
- J. Certifications shall be established in accordance with the time frames explained in Section 2.8.
- K. Verification of Certification forms shall be issued to each participant who expresses the intent to relocate during the certification period and such forms from other CSFP sites or states shall be honored in accordance with Section 2.9 and Attachment 2.8.
- L. The Contractor shall submit information about women, infants and children participating in the Program to the State on a quarterly basis. Such information will be compared to the WIC Program participation rolls to determine whether dual participation has occurred. See Section 2.10 and Attachment 2.9.



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SUBJECT:	Categorical Eligibility	Chapter:	2
		Section:	2.2
REFERENCES:	7 CFR 247.7(a)(1)	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To define categories of individuals who are eligible to receive CSFP food packages and documents required to verify eligibility.

POLICY: The local agency shall determine categorical eligibility in accordance with federal regulation.

PROCEDURES:

Categorical eligibility is determined using the following criteria:

CATEGORY	DEFINITION	VERIFICATION OF ELIGIBILITY	INCOME VERIFICATION
Elderly	Persons 60 years of age or older.	Birth certificate or hospital record of birth are preferred; if not available, may use any of the following which must show the applicant's name, age or date of birth: state identity card, insurance policy, driver's license, clinic, doctor, or hospital record, U.S. passport or U.S. citizen ID card, marriage or divorce record, voter's registration, military record, newspaper notice of birth, welfare card, any other document providing identifying data sufficient to establish age.	Self declared. See Sections 2.4 and 2.5.
Pregnant Woman	Woman <u>determined</u> to have one or more fetuses in utero.	Visual observation if the woman is obviously pregnant. Written note from a physician if pregnancy is not obvious.	Self declared income (see Sections 2.4 and 2.5) or a current notice of eligibility for food stamps or TA (Temporary Assistance).
Postpartum Woman	Woman up to 12 months after termination of pregnancy.	Birth certificate or hospital record of birth or newspaper notice of birth of infant (with date indicated) or physician's notice of an otherwise termination of pregnancy.	Same as pregnant woman.



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SUBJECT: Categorical Eligibility	Chapter: 2
	Section: 2.2
REFERENCES: 7 CFR 247.7(a)(1)	Page: 2 of 2
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CATEGORY	DEFINITION	VERIFICATION OF ELIGIBILITY	INCOME VERIFICATION
Breastfeeding Woman	Woman up to one year postpartum who is breastfeeding her infant.	Same as postpartum woman and woman does not take more than six cans of concentrate or 2 cans of powdered supplementary formula for her infant and states she is breastfeeding.	Same as pregnant woman.
Child	Person who is at least one year of age but has not reached their sixth birthday.	Birth certificate or hospital record of birth; if not available, use any of the following showing name and birthday: immunization record, adoption record, clinic, doctor or hospital record, U.S. passport or U.S. citizen ID card, welfare ID card, or any other document providing identifying data sufficient to establish proper age.	Same as pregnant woman.
Infant	Person under one year of age.	Same as for children.	Same as pregnant woman.



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SUBJECT:	Residency Requirement	Chapter:	2
		Section:	2.3
REFERENCES:	7 CFR 247.7(a)(5)	Page:	1 of 1
		Revised:	8-2-04

PURPOSE: To define the residency requirement for participation in the Missouri Commodity Supplemental Food Program.

POLICY: Person's eligible for Missouri's CSFP must reside in Missouri, within the normal service area of the local agency or distribution site. There are no duration or fixed residency requirements. Migrant and seasonal farm workers are considered as meeting the residency requirement.

PROCEDURES:

- A. Local agencies are authorized to serve residents from counties within their normal service area as defined by Second Harvest. In special cases, local agencies may serve residents from counties outside their service area as long as the area does not overlap another local agency's CSFP service area.
- B. Local agencies will establish distinct, non-overlapping service areas for distribution and certification sites under their jurisdiction.
- C. Elderly persons living in nursing homes are not eligible for CSFP benefits.
- D. Verification of residency may include a utility bill, driver's license, welfare identification card, a letter addressed to the applicant, or an indication from an employer that residency is in Missouri.



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SUBJECT:	Participant Income	Chapter:	2
		Section:	2.4
REFERENCES:	7 CFR 247.7(a)(2)&(3) and CFR 246.7(d)(2)(ii)	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To define what is considered income for purposes of CSFP income eligibility assessment.

POLICY: The local agency shall use the definition of income established in the federal regulations.

PROCEDURES:

- A. Income is gross cash income before any deductions including those for:
 - 1. Income taxes.
 - 2. Employee's social security taxes.
 - 3. Insurance premiums.
 - 4. Retirement.
 - 5. Any other deductions, such as bonds or garnishments.
- B. The local agency shall count as income the following.
 - 1. Monetary compensation for services, including:
 - a. Wages or salary.
 - b. Commissions.
 - c. Fees.
 - d. Tips.
 - e. Training stipends, except where elsewhere excluded. (See Section 2.5).
 - 2. Net income (gross receipts less operating expenses) from:
 - a. Farming self-employment.
 - b. Non-farming self-employment.
 - c. Rental property.
 - d. Royalties.
 - 3. Social Security benefits.
 - 4. Public assistance or welfare payments.
 - 5. Unemployment compensation.
 - 6. Strike benefits.
 - 7. Workmen's compensation.
 - 8. Pensions, retirement pay or annuities from:
 - a. Government.
 - b. Military or veteran's agencies.
 - c. Private companies.
 - 9. Alimony received.
 - 10. Child support received.
 - 11. Dividends or interest received.



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SUBJECT:	Participant Income	Chapter:	2
		Section:	2.4
REFERENCES:	7 CFR 247.7(a)(2)&(3) and CFR 246.7(d)(2)(ii)	Page:	2 of 2
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12. Income from estates or trust accounts.
13. Regular contributions from a person not living in the household, such as parental assistance to students.
14. Other cash income such as:
 - a. Prizes.
 - b. Military housing allowance if assigned to a high cost of living area. (CONUS)
 - c. Withdrawal from savings or investments.
 - d. Student financial assistance that does not meet specific exclusions. (See Section 2.5)
 - e. Loans that do not need to be repaid.
 - f. Capital gains.
 - g. Lump sum payments that are not reimbursements for lost assets or injuries, (e.g. lottery winnings, settlements over and above loss of assets).
 - i. The agency should treat these in a way that most accurately reflects the economic situation of the household.
 - ii. The agency should count these as annual income, not current monthly income. The agency may divide the total amount by 12 to calculate monthly income.
 - h. Family Subsistence Supplemental Allowances (FSSA) provided by the Department of Defense (DOD) to low-income members of the Armed Forces.



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SUBJECT:	Income Exclusion	Chapter:	2
		Section:	2.5
REFERENCES:	7 CFR 247.7(a)(2)&(3) and CFR 246.7(d)(2)(iv,v)	Page:	1 of 3
		Revised:	8-2-04

PURPOSE: To define what is not considered income in determining CSFP income eligibility.

POLICY: The local agency shall not count as income anything excluded by federal regulations.

PROCEDURES:

- A. Non-cash income or benefits will not be considered income by the local agency.
- B. The local agency shall not count as income the following.
 - 1. The value of:
 - a. In-kind housing or other benefits.
 - b. Bartered services.
 - 2. The Basic Allowance for Housing (BAH) received by military families, living in the United States. This exclusion includes payments for both off-base housing and for privatized on-base housing.
 - 3. The cost of living allowance the family receives when the military member is assigned and lives overseas, but the family (participant) lives within the United States. This is referred to as (OCONUS COLA).
 - 4. Volunteer payments through:
 - a. Title I and II of the Domestic Volunteer Service Act of 1973 (VISTA and others, and RSVP, SCP, foster grandparents and others).
 - b. Section 8(b)(1)(B) of the Small Business Act (SCORE and ACE).
 - 5. Payments through:
 - a. The Job Training Partnership Act (JTPA).
 - b. Summer youth employment and training programs (SYETP).
 - c. Programs for Native Americans.
 - d. Migrant and Seasonal Farmworkers Program.
 - e. Veterans Employment Programs.
 - f. Job Corps.
 - g. HUD rent subsidies.
 - h. The Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 as amended in 1987. This is for persons displaced from their homes by federal or state projects.
 - i. The Civil Liberties Act of 1988 (Japanese internment camps).
 - j. Dislocated worker programs.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Income Exclusion	Chapter:	2
		Section:	2.5
REFERENCES:	7 CFR 247.7(a)(2)&(3) and CFR 246.7(d)(2)(iv,v)	Page:	2 of 3
		Revised:	8-2-04

6. Cash stipend from the Division of Mental Retardation & Developmental Disabilities for purchasing goods & services for a family member with a developmental disability.
7. The value of assistance to children or their families under the:
 - a. National School Lunch Act.
 - b. Child Nutrition Act of 1966 (Special Milk, School Breakfast, Summer Food Service, and Child & Adult Care Food Programs).
 - c. Food Stamp Act of 1977.
8. Benefits received through childcare grant programs under:
 - a. Section 402(g)(1)(E) of the Social Security Act, as amended by the Family Support Act. These include these programs operated through Family Services.
 - i. Transitional Child Care (At-Risk) program.
 - ii. Futures (JOBS) program.
 - b. Childcare and Development Block Grant.
9. Student financial assistance that meets all the following criteria.
 - a. Used to pay for costs of attending the institution at least half-time, but not for room and board or dependent care. Institutional attendance costs include:
 - i. Tuition and fees.
 - ii. Books and supplies.
 - iii. Transportation.
 - iv. Miscellaneous personal expenses for the student.
 - b. Provided through any of the following under Title IV of the Higher Education Act of 1965:
 - i. Pell Grants.
 - ii. Supplemental Educational Opportunity Grant.
 - iii. Stafford Loans.
 - iv. Perkins Loans.
 - v. PLUS Loans/Supplemental loans for students.
 - vi. College Work Study.
 - vii. Byrd Honor Scholarship programs.
10. Tax refunds.
11. Gifts periodically given.
12. Loans of any kind that must be repaid.
13. Reimbursements for expenses incurred such as:
 - a. Business expenses.
 - b. Medical bills.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Income Exclusion	Chapter:	2
		Section:	2.5
REFERENCES:	7 CFR 247.7(a)(2)&(3) and CFR 246.7(d)(2)(iv,v)	Page:	3 of 3
		Revised:	8-2-04

14. Lump sum payments or large cash settlements received by family (economic unit) as reimbursements for lost assets or injuries. For other cash income, see Section 2.4, "Participant Income ".
15. Any subsidy that a household receives through the prescription drug discount card program.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Waiting Lists	Chapter:	2
		Section:	2.6
REFERENCES:	7 CFR 247.7(b)	Page:	1 of 2
		Revised:	8-12-04

PURPOSE: To provide guidance for establishing a waiting list when there are no funds available to provide program benefits for individuals who visit the local agency to apply for the Missouri Commodity Supplemental Food Program.

POLICY: When the maximum caseload is reached the contractor or subcontractor shall implement a waiting list in accordance with federal regulation.

PROCEDURES:

- A. The contractor assigns maximum caseloads to each subcontractor. See Chapter 3. Caseload Management. When the maximum caseload is reached the contractor or subcontractor shall implement a waiting list using Attachment 2.5, Participant Waiting List or a facsimile.
- B. Individuals are notified of their placement on a waiting list within 20 days after they visit the local agency during regular office hours. Participants placed on the waiting list are told verbally that they are being placed on a waiting list or they are notified in writing using Attachment 2.6, Notification of Applicant Status or a facsimile. A copy of the notification is retained in the participant's file. If verbal notification is given, it is documented on the waiting list form.
- C. If there is no waiting list, a person determined eligible for program benefits receives supplemental foods within 10 days of notification of eligibility.
- D. Individuals who are determined to be ineligible for participation in the CSFP are notified of their ineligibility within 20 days of the first on-site visit to apply for program benefits.
- E. As the certification period of a current participant expires, the contractor or trained subcontracting agency personnel must first serve any transferring participants, see Section 2.9. If there are none, the certifying official must apply the following priorities:
 - Priority 1: Pregnant or breastfeeding women or infants at risk of inadequate diet due to limited income.
 - Priority 2: Children at risk of inadequate diet due to limited income, ages 1 through 3.
 - Priority 3: Children at risk of inadequate diet due to limited income, ages 4 through 5.
 - Priority 4: Postpartum women at risk of inadequate diet due to limited income.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Waiting Lists	Chapter: 2
	Section: 2.6
REFERENCES: 7 CFR 247.7(b)	Page: 2 of 2
	Revised: 8-12-04

Priority 5: Elderly person at risk of inadequate diet due to limited income and are confined to their homes because of a physical disability, medical reason, lack of accessibility to a motor vehicle or lack of a valid driver's license or a restricted driver's license.

Priority 6: Elderly person at risk of inadequate diet due to limited income, and is not homebound.

- F. Available caseload authorizations must be offered to the first individual listed in any priority category above that of the individual whose certification period has expired. Use Attachment 2.6, Notification of Applicant Status, to notify both individuals. It is not considered an adverse action if an individual cannot be re-certified due to their priority category. The individual becomes an applicant on the waiting list again. Notification of appeal rights is not required at the expiration of a certification period, per 7 CFR Ch. II, Part 247.20(b).

Scenario #1: Elderly person AB is due to be re-certified. Five year-old child CD is on the waiting list. Elder person AB is given a Notification of Applicant Status with the first statement checked, "We are at maximum caseload...". Five year-old child CD is sent a Notification of Applicant Status with either the second or third statement checked.

Scenario #2: Elderly person AB is due to be re-certified. Although there are elderly persons on the waiting list in Priority 6, there are no individuals in Priorities 1 through 5. Elderly person AB is eligible to be re-certified.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Fair Hearings	Chapter:	2
		Section:	2.7
REFERENCES:	7 CFR 247.7(f)(1 - 3) and 7 CFR 247.20	Page:	1 of 1
		Revised:	8-2-04

PURPOSE: To provide guidance for notifying applicants of their right to a fair hearing and their appeal rights.

POLICY: At the time of certification and re-certification, applicants are informed that they have a right to a fair hearing and that they may appeal any decision made by the local agency regarding denial or termination from the CSFP.

PROCEDURES:

- A. The statement, "You may appeal any decision made by the local agency regarding your denial or termination from the Program" appears on the Participant Application, Attachment 2.1, and will be read by or to each applicant as part of certification and re-certification.
- B. When certification periods expire, appeal rights notification is not required per 7 CFR 247.20(b). Recertification depends on caseload availability and eligibility. See Section 2.6 – Waiting Lists.
- C. A person found ineligible for the Program during the certification process shall be advised in writing of the reasons for ineligibility and of the right to a fair hearing using Attachment 2.7, Notice of Adverse Action. Documentation of the reasons for ineligibility shall be retained on file at the local agency.
- D. A person found ineligible at any time during the certification period shall be advised in writing 15 days before termination of eligibility of the reasons for ineligibility and of the right to a fair hearing using Attachment 2.7, Notice of Adverse Action. A copy of the notification is maintained in the applicant's file.
- E. Applicants or participants wishing to appeal denial or termination of benefits will have 60 days from the date of notice of ineligibility. The request for a hearing is defined as, any clear expression by the individual, guardian, or other representative that an opportunity to present its case to a Hearing Officer is desired.
- F. See Chapter 12 for details about fair hearings for individuals (Section 12.1) and for local agencies (Section 12.2).



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

SUBJECT:	Certification Periods	Chapter: 2
		Section: 2.8
REFERENCES:	7 CFR 247.7(g)	Page: 1 of 2
		Revised: 8-2-04

PURPOSE: To define the length of certification periods for program benefits according to participant category.

POLICY: Program benefits shall be based upon certifications established in accordance with the time frames designated by federal regulation.

PROCEDURES:

Each participant is certified for Program benefits for the following intervals.

CATEGORY	CERTIFICATION PERIOD
Elderly	Certified at the time of entrance into the program and at six-month intervals. At the initial and each odd-numbered certification (one year intervals), the elderly person's certification shall be based on an assessment of newly submitted eligibility information. On each even-numbered certification (first six month interval, annual intervals thereafter), re-certification can be done by contacting the elderly person to see if they are still interested <u>and by confirming each participant's address</u> . If they are interested, they can be continued for another six months. Even and odd-certification periods will be documented on the certification form.
Pregnant Woman	A pregnant woman will be certified at the time of entrance into the program for the duration of her pregnancy and for six weeks postpartum.
Postpartum Woman	<p>A woman enrolled in the program during pregnancy will be screened for re-certification within six weeks of termination of the pregnancy for a six-month certification period. She is eligible for benefits through the month her infant turns one year of age, using two certification periods.</p> <p>A postpartum woman not enrolled during pregnancy may be screened for certification at any time up to one year postpartum by using six-month intervals, not to extend beyond the month her infant turns one year of age.</p>



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Certification Periods	Chapter:	2
		Section:	2.8
REFERENCES:	7 CFR 247.7(g)	Page:	2 of 2
		Revised:	8-2-04

CATEGORY	CERTIFICATION PERIOD
<p>Breastfeeding Woman</p> <p>NOTE: A woman's status of breastfeeding ends when breastfeeding is discontinued during the baby's first year, or with the end of the month that the infant turns one year of age.</p>	<p>A breastfeeding woman enrolled in the program during pregnancy will be screened for re-certification within six weeks of termination of pregnancy as a breastfeeding woman.</p> <p>A breastfeeding woman not enrolled during pregnancy may be certified at any time up to one year postpartum. A woman will be certified as breastfeeding at intervals of six months. A woman certified as breastfeeding is terminated the month her baby turns one year of age regardless of the length of the certification period.</p> <p>If a breastfeeding woman participant stops breastfeeding at any time before the end of the six-month certification period, her condition status changes from breastfeeding to postpartum. If waiting lists are imposed, she will continue to receive benefits until the end of her current certification period, at which time she will be re-evaluated based on priority needs.</p>
Child	<p>A child will be certified at the time of entrance into the program and at six-month intervals thereafter. A child will be terminated from the CSFP no later than his/her sixth birthday. Program benefits may be continued until the end of the month in which the child has his/her sixth birthday.</p>
Infant	<p>An infant will be certified at the time of entrance into the program and at six-month intervals thereafter. An infant born to a CSFP mother can be issued food for one month based on the mother's eligibility, however, before the next month's food is issued, a certification screening must be completed for the infant.</p> <p>Category and priority change from infant to child will take place at one year of age. Re-screening will not be required if six months has not lapsed. An infant's food package can be given the month the infant turns one year of age, or a child's package can be given at the mother's discretion.</p>



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Transfer of Certification	Chapter:	2
		Section:	2.9
REFERENCES:	7 CFR 247.7(i)	Page:	1 of 1
		Revised:	8-2-04

PURPOSE: To provide a mechanism for certified participants to retain eligibility if they relocate during the certification period.

POLICY: Every participant who intends to relocate during the certification period shall be issued a Verification of Certification form, Attachment 2.8. Local agencies and their subcontractors will accept Verification of Certification forms from other CSFP agencies in accordance with federal regulation and this policy.

PROCEDURES:

- A. Local agencies and/or certification sites shall issue Verification of Certification form, Attachment 2.8 to any participant who expresses intent to relocate during the certification period.
- B. Local agencies and/or certification sites shall accept Verification of Certification form, Attachment 2.8 issued by other local agencies or similar documents issued by other states.
- C. The verification of certification is valid until the certification period expires, and shall be accepted as proof of eligibility for Program benefits.
- D. If a receiving local agency has waiting lists for participation, the transferring participant shall be placed on the list ahead of all waiting applicants.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Dual Participation	Chapter: 2
	Section: 2.10
REFERENCES: 7 CFR 247.7(j)	Page: 1 of 1
	Revised: 8-2-04

PURPOSE: To provide a mechanism for detecting and preventing dual participation.

POLICY: Local agencies in conjunction with the Department are responsible for the detection and prevention of dual participation.


PROCEDURES:

- A. The following sentence appears on the application and must be read by, or read to, the applicant or the applicant's parent or caretaker, in the appropriate translation, at the time of certification, "It is illegal to participate in both the CSFP and the WIC program, and it is illegal to participate in two different CSFP programs at the same time." See Section 2.1.
- B. Local agencies shall establish safeguards against dual participation in two different CSFP programs at the same time by establishing procedures that identify participants who are participating in two different programs or by establishing specific service areas for each distribution site.
- C. Local agencies shall refer categorically eligible women, infant and child applicants to the WIC Program, especially those who appear to be at high risk, while providing applicants with the right to choose between the two programs.
- D. The State Agency conducts research to detect dual participation in both the CSFP and the WIC program. On a semiannual basis, in July and January, the local agencies shall submit Attachment 2.9 electronically. Listed on this Excel spreadsheet shall be the name, date of birth, social security numbers of the participant and the guardian (for infants and children), county of residence and the sex of each woman, infant and child participating in CSFP. If either social security number is not provided or not available, the participant's complete address must be provided.
- E. The State Agency will immediately notify appropriate local contractors of CSFP participants who are determined to be dually participating in CSFP and WIC, unless it is determined by WICNS that termination in the WIC program is more appropriate. The Local agency shall take action to terminate the participant from CSFP immediately using the Notice of Adverse Action, Attachment 2.7. A copy of the Notice of Adverse Action must be submitted to the State to assure that dual participation has been suspended.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
COMMUNITY FOOD AND NUTRITION ASSISTANCE
COMMODITY SUPPLEMENTAL FOOD PROGRAM
PARTICIPANT APPLICATION

Attachment 2.1

NAME OF APPLICANT		SOCIAL SECURITY NUMBER		
ADDRESS		TELEPHONE NUMBER		
CITY/STATE/ZIP CODE		TOTAL NUMBER LIVING IN HOUSEHOLD		
ARE ANY OF THE APPLICANTS CURRENTLY OR HAVE THEY PREVIOUSLY BEEN ON THE CSFP? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHERE?		
ARE ANY OF THE APPLICANTS CURRENTLY OR HAVE THEY PREVIOUSLY BEEN ON WIC? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHERE?		
NAMES OF QUALIFYING HOUSEHOLD MEMBERS	AGE	DATE OF BIRTH	SOCIAL SECURITY NUMBER	
RACIAL ETHNIC DATA				
AMERICAN INDIAN OR ALASKA NATIVE	ASIAN	WHITE	BLACK OR AFRICAN AMERICAN	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
HISPANIC OR LATINO? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Indicate source and amount of current (last month's) income before deductions, such as taxes and social security. This amount must include income of all household members. If last month's income is not representative of usual household income, please project a yearly income which would be. "Other" income would include commissions, strike benefits, income from trusts, contributions from relatives, etc.				
HOUSEHOLD INCOME		AMOUNT	HOW OFTEN RECEIVED	
GROSS SALARY, WAGES				
SOCIAL SECURITY				
PUBLIC ASSISTANCE (WELFARE)				
CHILD SUPPORT (ALIMONY)				
PENSIONS/RETIREMENT				
SELF-EMPLOYMENT				
UNEMPLOYMENT				
OTHER INCOME				
TOTAL HOUSEHOLD INCOME				
BEFORE SIGNING, BE AWARE OF YOUR RIGHTS: * Standards for participation in the Program are the same for everyone regardless of race, color, national origin, sex, age and disability. * You may appeal any decision made by the local agency regarding your denial or termination from the Program. * If your application is approved, the local agency will make nutrition education available to you and you are encouraged to participate.				
SIGNATURE: This certification form is being completed in connection with the receipt of Federal assistance. Program officials may verify information on this form. I am aware that deliberate misrepresentation may subject me to prosecution under applicable State and Federal statutes. I have been advised of my rights and obligations under the Program. I certify that the information I have provided for my eligibility determination is correct to the best of my knowledge. I also understand that it is illegal to participate in both the CSFP and the WIC program, and it is illegal to participate in two different CSFP programs at the same time.				
SIGNATURE OF APPLICANT OR GUARDIAN 			DATE	
FOR AGENCY USE ONLY				
TYPE OF PROOF OF AGE/ELIGIBILITY PRESENTED		RESIDENCY VERIFIED?	HEALTH AND SOCIAL SERVICES INFORMATION PROVIDED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
SIGNATURE OF CERTIFYING OFFICIAL		TITLE		
ELIGIBLE	INELIGIBLE	CATEGORY PG PP BF INF CH ELD	DATE OF CERTIFICATION	
RECERTIFICATION (6 MONTH)				
NAME, ADDRESS, SSN VERIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO		CATEGORY PG PP BF INF CH ELD	DATE OF RECERTIFICATION	
SIGNATURE OF CERTIFYING OFFICIAL 			TITLE	

Women, Infants, and Children
 185 percent of the [Federal Poverty Income Guidelines](#)
 amounts valid until March 31, 2005

*Pregnant women are counted as **two** family members**

Family Size	Annual	Monthly	Weekly
1	\$17,224	\$1,436	\$332
2	\$23,107	\$1,926	\$445
3	\$28,990	\$2,416	\$558
4	\$34,873	\$2,907	\$671
5	\$40,756	\$3,397	\$784
6	\$46,639	\$3,887	\$897
7	\$52,522	\$4,377	\$1,011
8	\$58,405	\$4,868	\$1,124
Each additional family member	Plus \$5,883	Plus \$491	Plus \$114

* In the case of a known multiple birth pregnancy, each fetus will be counted as one family member.

Persons 60 Years and Older
 130 percent of the [Federal Poverty Income Guidelines](#)
 amounts valid until March 31, 2005

Family Size	Annual	Monthly	Weekly
1	\$12,103	\$1,009	\$233
2	\$16,237	\$1,354	\$313
3	\$20,371	\$1,698	\$392
4	\$24,505	\$2,043	\$472
5	\$28,639	\$2,387	\$551
6	\$32,773	\$2,732	\$631
7	\$36,907	\$3,076	\$710
8	\$41,041	\$3,421	\$790
Each additional family member	+\$4,134	+\$345	+\$80

The Commodity Supplemental Food Package is:

- ✓ for YOU, the participant, not for other family members.
- ✓ designed to SUPPLEMENT your food intake in order to meet YOUR special nutrition needs. See the chart below.

If you have additional special dietary needs, please notify the certification or distribution staff. They may be able to suggest ways to select adequate diets.

COMMODITY	INFANTS & CHILDREN				MOMS		SENIORS
Food Type Package size	0-3 mos.	4-12 mos.	1-2 yrs	3-6 yrs	Pregnant or breastfeeding	Non- breastfeeding postpartum	60 yrs & over
Canned Meat 24-29 oz.			1	1	1	1	1
Canned Vegetables 14-16 oz.			4	4	6	4	4
Canned Fruits 14-16 oz.			2	2	4	2	2
Cereal Varies			1	1	1	1	1
Cheese 2 lbs			1	1	1	1	1
Pasta or rice or potatoes 2 lbs			1	1	1	1	1
Evaporated Milk 12 oz.			33	5	11	3	3
Dry Beans or Peanut butter 1 lbs 18 oz.			1	1	1	1	1
Dry Milk 1.8 lbs.				1	1	1	1
Juice, 100% 46 oz.			4	4	5	3	3
Infant Formula 14 oz powder	9	9					
Infant Cereal 8 oz.		2					

Available with your food package or at the distribution site are:

- ✓ Recipes and nutrition tips suggesting ways to select adequate diets.
- ✓ Information on the use of the supplemental foods and on the nutritional value of the foods. <http://www.fns.usda.gov/fdd/facts/hhpfacts/hp-csfp.htm>
- ✓ Information on the benefits of breastfeeding. <http://www.dhss.mo.gov/breastfeeding/>



Commodity Supplemental Food Program Health and Social Services Referral Information

Supplemental Nutrition Program for Women, Infants and Children (WIC)

- WIC is a nutrition education, health promotion and supplemental food program to assist women, infants and children who have nutritional needs. Benefits include: nutrition education guidance for women and their children at no cost, breastfeeding education and support, nutritious foods to supplement your diet, such as cheese, milk, eggs, and cereal, at no cost, and referrals for health care.

IMPORTANT NOTICE: Individuals MAY NOT participate in WIC and CSFP at the same time.

For more information call 1-800-392-8209 or visit <http://www.dhss.mo.gov/wic>.

Child Support Enforcement (CSE):

- CSE's responsibilities include locating parents, establishing paternity, establishing child and medical support orders, monitoring and enforcing compliance with child and medical support orders, and distributing support collections.

Call CSE toll free at 1-800-859-7999 for more information.

Food Stamps

- Eligible households receive an allotment of food benefits that may be used to purchase any food or food products prepared for human consumption except for alcoholic beverages and tobacco, hot foods, or foods prepared for immediate consumption. Foods may be purchased using the food stamp benefits from any grocery or retail store anywhere in the U.S. that has been authorized by USDA.

Call the local Family Support Division Office or go to <http://www.dss.mo.gov/fsd/fstamp>.

MC+ for Kids – Missouri's Health Insurance Program for Children

- MC+ for Kids, part of the federal Children's Health Insurance Program is a health insurance program for uninsured children of low-income families who do not have access to affordable health insurance. Uninsured children, ages birth to 19, whose gross family income is up to 300% of the federal poverty level are eligible.

For more information, call 1-888-275-5908.

Medicaid

- The Medicaid program provides medical services to persons who meet eligibility requirements as determined by the Family Support Division. The goals of the program are to promote good health, to prevent illness and premature death, correct or limit disability, to treat illness, and to provide rehabilitation to persons with disabilities.

For more information, call 1-800-392-2161

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer. Revised: 8/04

Temporary Assistance

- The Temporary Assistance Program provides assistance to needy families with children so they can be cared for in their own home. The program reduces dependency by promoting job preparation, work and marriage. Funds may also be used to prevent non-marital pregnancies and encourage the formation and maintenance of two-parent families.

For more information, contact the Family Support Division at 1-800-392-1261

Supplemental Security Income (SSI)

- SSI pays monthly benefits to people who are 65 and older, or blind, or have a disability and who don't own much or have a lot of income. Many people who get SSI are also eligible to receive Food Stamps and Medicaid benefits.

To apply, visit your local Social Security Office or call 1-800-772-1213.

Medicare

- Medicare provides health insurance to persons aged 65 and over, disabled persons under the age of 65 whom have received social security disability cash benefits for at least 24 months, and persons with end stage renal disease (ESRD). Part A of Medicare covers inpatient hospitalizations, short term skilled nursing facility care, home health, and hospice care for the terminally ill. Part B covers physician's services, outpatient hospital care, therapy, ambulance transportation, lab and x-ray services, durable medical equipment, and home health services. Various deductibles and cost sharing amounts are the responsibility of the beneficiary or any supplemental insurance they may have. Medicare benefits can be received through a fee-for-service system or managed care plans in some areas of the state.

For more information call 1-800-MEDICARE (1-800-633-4227) or visit www.medicare.gov.

Energy Assistance Program

- The Missouri Low Income Home Energy Assistance Program is designed to help pay heating bills for those Missourians in need of assistance during the months of December, January, February, and March. Applications for the program are accepted by the Family Support Division from November through March. To qualify, you must be responsible for paying heating costs and meet specific income guidelines based on household size.

For more information call 1-800-392-1261.

TEL-LINK 1-800-835-5465

Tel-Link can connect you to services for: Family planning, prenatal care, parenting, sexually transmitted diseases, immunizations, alcohol and drug abuse, sexual assault or rape, family violence, pregnancy/infant loss, adoption, counseling, children with special health care needs, well-child clinics and more.

Other Important Numbers:

Child Abuse/Neglect Hotline – 1-800-392-3738
Parental Stress Helpline – 1-800-367-2543

Aging Information Hotline – 1-800-235-5503
Elderly Abuse or Neglect Hotline – 1-800-392-0210

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF COMMUNITY HEALTH
COMMUNITY FOOD AND NUTRITION ASSISTANCE
COMMODITY SUPPLEMENTAL FOOD PROGRAM
PARTICIPANT WAITING LIST

Attachment 2.5

[illegible]

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF COMMUNITY HEALTH
COMMODITY SUPPLEMENTAL FOOD PROGRAM
NOTIFICATION OF APPLICANT STATUS

Local Agency Address: _____

Date: _____

Applicant's Name: _____

Address: _____

CATEGORIES:

PG – Pregnant Woman BF – Breastfeeding Woman PP – Postpartum

INF – Infant CH – Child ELD – Elderly

WAITING LIST NOTIFICATION:

_____ We are at maximum caseload and are unable to process you at this time.
You will be placed on a waiting list and contacted when slots become
available.

_____ We have caseload openings now. Please be informed it is time to re-
determine your eligibility for the CSFP.

_____ Complete the enclosed forms and bring them and the applicant/participant
listed above to our office located at the address above during the hours of
_____ - _____ on these days or dates _____.

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
DIVISION OF COMMUNITY HEALTH
COMMUNITY FOOD AND NUTRITION ASSISTANCE
NOTICE OF ADVERSE ACTION

Attachment 2.7

NAME: _____

CASE NUMBER: _____

ADDRESS: _____

DATE: _____

This is to inform you that the following action will be taken regarding your participation in the CSFP:

- ☐ The amounts of CSFP commodities you have been receiving will be reduced effective _____.
- ☐ You have been determined to be ineligible for CSFP commodities.
- ☐ You are no longer eligible to receive CSFP commodities.

The reason for this action is listed below:

Tear along the dotted line and return to your Food Distribution site

You have a right to request a Fair Hearing if you do not agree with the action taken. You must request a hearing within 60 days from the date this notice is mailed. If you have been determined to be ineligible for CSFP participation, you may appeal within 60 days of the date this notice is mailed. If a hearing is not requested, your benefits will be reduced or terminated accordingly.

If you request a Fair Hearing, you may continue to receive benefits until a hearing decision is arrived at, unless you have been determined to be ineligible for the CSFP. If the Agency is upheld in its decision, a claim against the household shall be established for all over-issuance of USDA foods.

☐ I WISH TO REQUEST A FAIR HEARING ☐ YES ☐ NO

NAME: _____

PHONE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 DIVISION OF COMMUNITY HEALTH
 COMMODITY SUPPLEMENTAL FOOD PROGRAM
VERIFICATION OF CERTIFICATION

Name of Participant: _____

Date Certified: _____

Date Certification Expires: _____

Category: ☐ ELD – Elderly ☐ INF – Infant ☐ CH – Child
☐ PG – Pregnant Woman ☐ BF – Breastfeeding Woman ☐ PP – Postpartum

Verification Statement:

The participant named above has expressed intent to relocate and is eligible to participate in the Commodity Supplemental Food Program until the stated expiration date. This Verification of Certification form shall be accepted as proof of eligibility for Program benefits.

If a waiting list exists at the receiving local agency, the named participant shall be placed on the list ahead of all waiting applicants.

The CSFP Participant Application for the participant named above is on file at:

 Certifying local agency Agency code

 Local agency address Zip Code

 Signature of local agency official Date:

 Title of local agency official
 (Please print of type)

Attachment 2.9

Highlighted fields are required. Address is required if either SSN is not available.

[illegible]



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 3

Caseload Management

Chapter 3	Caseload Management	3.1
	Participant “No-show” policy	3.2
	Outreach Efforts.....	3.3
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	Attachment 3.1 – Caseload Averaging Worksheet	
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	Attachment 3.3 – CSFP Brochure for Women, Infants and Children	
	Attachment 3.4 – CSFP Brochure for general use	
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COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Caseload Management	Chapter:	3
		Section:	3.1
REFERENCES:	7 CFR 247.7(b) and 247.10(a)	Page:	1 of 3
		Revised:	8-12-04

PURPOSE: To provide guidelines for the process of caseload management.

POLICY: Assigning and management of caseload will be accomplished in accordance with federal regulations and department policies.

PROCEDURES:

A. The caseload assignment process is as follows:

1. The Missouri Department of Health and Senior Services –Community Food and Nutrition Assistance is granted caseload by the USDA Food and Nutrition Service to serve women, infants, children and elderly persons based on federal budget availability and program participation during the previous federal fiscal year.
2. USDA announces caseload allocation annually in December. USDA evaluates requests for expansion caseload based on actual caseload served during the previous federal fiscal year.
3. Missouri allocates caseload to contractors based on the contractors' requests, their demonstrated capabilities, and projected CSFP eligible population within their service area.
4. Contractors shall allocate caseload to each distribution and certification site based on available caseload, estimated eligible population and the capacity of the site.
5. The authorized caseload assignment will be made in terms of a monthly level, i.e., a caseload assignment of 500 authorizes 500 participants to receive food packages each month for the caseload cycle (January 1 through December 31).

B. Monitor caseload and calculate averages to determine adjustments needed.

1. Local agencies must report, by category, the number of participants who actually receive food packages each month on the FNS-153. See Sections 5.5 and 8.3 and Attachment 5.4.
2. Local agencies shall monitor participation and averages monthly to assure maximum use of caseload and to prevent caseload levels from exceeding the assigned level. Attachment 3.1 – Caseload Averaging Worksheet, is available electronically for this purpose.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Caseload Management	Chapter: 3
	Section: 3.1
REFERENCES: 7 CFR 247.7(b) and 247.10(a)	Page: 2 of 3
	Revised: 8-12-04

- Fluctuations in participation are expected. Monthly monitoring will allow local agencies to adjust outreach efforts appropriately. If participation is below the authorized level, outreach efforts should be directed to contact and enroll eligible persons. See Section 3.3. If participation exceeds the authorized level, outreach should be reduced and directed to only those of highest risk. If necessary, a waiting list should be implemented. See Section 2.6.
- The electronic version of Attachment 3.1 – Caseload Averaging Worksheet contains three tabs. Enter total participation numbers monthly on the “Working” tab. The “Forecast” tab provides space to test several possible scenarios. Do not type on or modify the “Master” tab. Use it only to make copies. Contact 800-733-6251 for technical assistance.
- Attachment 3.2 – Caseload Averaging Scenarios demonstrates a six-month scenario on the Caseload Averaging Worksheet. For these examples the caseload assignment is 500. The total number of food packages available for the 12-month period, January through December, equals 6,000. That is 500 multiplied by 12.

Example 1:

6000	Total food packages available January thru December.
<u>- 470</u>	January’s participation as reported on the FNS-153.
5530	Total food packages available February thru December.
503	Monthly average packages available for the remaining 11 months (5530 divided by 11).

Example 2:

5530	Total food packages available February thru December.
<u>- 485</u>	February’s participation as reported on the FNS-153.
5045	Total food packages available March thru December.
505	Monthly average packages available for the remaining 10 months of the period (5045 divided by 10).

Examples 3 through 6 track each successive month. Each 12 month chart contains formulas to copy the current month distribution numbers into the remaining months providing a forecast of the total food packages to be used during the period if the number of participants were to remain the same.

Example 1 projects serving only 470 participants each of the twelve months and indicates a total of 360 available food packages would be unused by the end of the period. The “Monthly Average Allowable” in January indicates that caseload



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Caseload Management	Chapter: 3
	Section: 3.1
REFERENCES: 7 CFR 247.7(b) and 247.10(a)	Page: 3 of 3
	Revised: 8-12-04

could be increased to 502.7 per month for the remaining 11 months without exceeding authorized levels. The examples demonstrate a gradual increase of participants up to 510 in May, Example 5. This number exceeds the “Monthly Average Allowable” amount from the previous month, 505, and results in a negative “Total Remaining Caseload” in December, if distribution remains at 510 per month.

In June, Example 6, participation drops to 504 through natural attrition. The “Total Remaining Caseload” in December is once again positive. However, if participation had not dropped, a waiting list might need to be implemented until participation reduced to appropriate levels and the “Total Remaining Caseload” projected for December was either zero or a positive number.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Participant No-show Policy	Chapter:	3
		Section:	3.2
REFERENCES:	7 CFR 247	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To establish the maximum allowable period that persons may fail to pick-up food packages and remain enrolled in the program.

POLICY: To remain enrolled in the Commodity Supplemental Food Program, persons may fail to pick-up food during no more than two consecutive months.

PROCEDURES:

- A. Local agencies shall establish a “no-show” policy stating the maximum allowable period that persons may fail to pick-up food packages and remain enrolled in the program. The period may not exceed two consecutive months.
- B. The “no-show” policy shall be posted in a prominent location and each participant shall be informed of this policy during certification and recertification.
- C. Participants who violate the established “no-show” policy shall be notified that failure to contact the local agency within 15 days will result in removal from the program. Refer to Section 2.7D for the proper procedures to follow when notifying participants.
- D. Participants who are removed from the program for violation of the “no-show” policy are allowed to reapply for benefits. If a waiting list exist, all applications must be placed on the list by category, and in the order which they contacted the agency.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Outreach Efforts	Chapter:	3
		Section:	3.3
REFERENCES:	7 CFR 247	Page:	1 of 1
		Revised:	8-19-04

PURPOSE: To outline outreach activities designed to maximize caseload utilization.

POLICY: Outreach activities shall be conducted at both the State and local agency level.

PROCEDURES:

- A. At the state level, activities are coordinated with the WIC state agency. All persons applying for the WIC program who cannot receive WIC benefits because of caseload limitations or lack of risk factors required for WIC certification are referred to the CSFP program nearest to them. Outreach efforts are specifically targeted to the WIC “graduates” such as non-breastfeeding women greater than six months postpartum and children beyond their 5th birthday.
- B. On an annual basis, MDHSS will submit a press release to appropriate Missouri newspapers, radio stations, and television stations, to announce the availability of the CSFP, on behalf of each local agency with available caseload. Eligibility criteria and income guidelines will be published with the press release. The press release will also be posted on the Department web page at <http://www.dhss.mo.gov>.
- C. Local agencies shall also work closely with the WIC agencies in their service areas to market the program. Outreach flyers are available to promote and advertise the CSFP in WIC agencies. See attachments 3.3 and 3.4.
- D. Outreach to elderly populations may be conducted through the Area Agencies on Aging, as well as through a variety of community venues. Flyers outlining the program benefits and criteria for participation are available to the agencies and the senior centers they serve. See attachments 3.4 and 3.5. A toll free number is provided to direct potential participants to the nearest CSFP local agency as well as being posted on the web at http://www.dhss.mo.gov/csfp/sites_csfp.htm.
- E. The state works closely with local agencies to assure that all outreach activities are conducted in accordance with the plan. Local agencies shall use the flyers to post and/or distribute to local businesses and other community agencies announcing the availability of the program and where to go to get benefits.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Homebound Elderly	Chapter:	3
		Section:	3.4
REFERENCES:	7 CFR 247.7	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To outline efforts that are required to meet the needs of homebound elderly.

POLICY: Local agencies shall make arrangements to meet the needs of homebound elderly.

PROCEDURES:

- A. Local agencies shall coordinate efforts to meet the needs of homebound elderly with the local Area Agency on Aging (AAA) and the homebound “Meals on Wheels” program. Local agencies shall work with AAAs to identify potential homebound participants, to conduct outreach, and to conduct certification and delivery of food packages. Local agencies shall also allow designated proxies to pick up food packages for homebound elderly individuals.
- B. When appropriate, local agencies shall conduct training to volunteers in the communities to take applications to elderly persons and to collect appropriate information and documentation. Actual certification of the homebound elderly shall occur at the certification sites.
- C. Food packages shall be delivered directly by the local agency, by volunteers and/or proxies or, if possible, by programs in the AAA, such as the “Meals on Wheels” program. The homebound elderly recipient or their proxy shall be required to sign a roster or receipt upon delivery of the food package.

Caseload Averaging Worksheet

Attachment 3.1

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
January		-	-	11	0.0
February	-	-	-	10	0.0
March	-	-	-	9	0.0
April	-	-	-	8	0.0
May	-	-	-	7	0.0
June	-	-	-	6	0.0
July	-	-	-	5	0.0
August	-	-	-	4	0.0
September	-	-	-	3	0.0
October	-	-	-	2	0.0
November	-	-	-	1	0.0
December	-	-	-	0	

INSTRUCTIONS:

1. Enter authorized caseload in green cell A4
2. Enter number of participants served each month in column B from the FNS 153.
3. Attempt to certify the average numbers reflected in column F of the month entered.
4. Negative numbers anywhere in column D should prompt action. Reduce outreach.
May need to implement waiting lists.

NOTICE:

Future months in column B will show the number entered in the current month. In other words, when a number is entered in January that same number appears each month below. Then when a number is entered in February, that number appears in each month below.

THREE WORKSHEETS:

This spreadsheet has three worksheets or tabs titled: Master, Working, and Future.

"Master" tab:

Do not enter data on the "Master" tab. Use it only to make copies.

"Working" tab:

Enter current month data only on the "Working" tab.

Update the "Working" tab monthly with the totals from FNS 153.

"Future" tab:

Use the "Future" tab to enter "what if" scenarios for planning purposed.

The "Future" tab has multiple charts to enter several different scenarios.

For Technical Assistance: Call 800-733-6251.

Caseload Averaging Worksheet

Attachment 3.2

Example 1:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	470	940	5,060	10	506.0
March	470	1,410	4,590	9	510.0
April	470	1,880	4,120	8	515.0
May	470	2,350	3,650	7	521.4
June	470	2,820	3,180	6	530.0
July	470	3,290	2,710	5	542.0
August	470	3,760	2,240	4	560.0
September	470	4,230	1,770	3	590.0
October	470	4,700	1,300	2	650.0
November	470	5,170	830	1	830.0
December	470	5,640	360	0	

Example 2:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	485	955	5,045	10	504.5
March	485	1,440	4,560	9	506.7
April	485	1,925	4,075	8	509.4
May	485	2,410	3,590	7	512.9
June	485	2,895	3,105	6	517.5
July	485	3,380	2,620	5	524.0
August	485	3,865	2,135	4	533.8
September	485	4,350	1,650	3	550.0
October	485	4,835	1,165	2	582.5
November	485	5,320	680	1	680.0
December	485	5,805	195	0	

Example 3:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	485	955	5,045	10	504.5
March	500	1,455	4,545	9	505.0
April	500	1,955	4,045	8	505.6
May	500	2,455	3,545	7	506.4
June	500	2,955	3,045	6	507.5
July	500	3,455	2,545	5	509.0
August	500	3,955	2,045	4	511.3
September	500	4,455	1,545	3	515.0
October	500	4,955	1,045	2	522.5
November	500	5,455	545	1	545.0
December	500	5,955	45	0	

Caseload Averaging Worksheet

Attachment 3.2

Example 4:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	485	955	5,045	10	504.5
March	500	1,455	4,545	9	505.0
April	505	1,960	4,040	8	505.0
May	505	2,465	3,535	7	505.0
June	505	2,970	3,030	6	505.0
July	505	3,475	2,525	5	505.0
August	505	3,980	2,020	4	505.0
September	505	4,485	1,515	3	505.0
October	505	4,990	1,010	2	505.0
November	505	5,495	505	1	505.0
December	505	6,000	-	0	

Example 5:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	485	955	5,045	10	504.5
March	500	1,455	4,545	9	505.0
April	505	1,960	4,040	8	505.0
May	510	2,470	3,530	7	504.3
June	510	2,980	3,020	6	503.3
July	510	3,490	2,510	5	502.0
August	510	4,000	2,000	4	500.0
September	510	4,510	1,490	3	496.7
October	510	5,020	980	2	490.0
November	510	5,530	470	1	470.0
December	510	6,040	(40)	0	

Example 6:

A	B	C	D	E	F
Authorized Caseload	Total CSFP Participants by month	Cumulative Total Participants	Total Remaining Caseload	Months Remaining in period	Monthly Average Allowable
500					
January	470	470	5,530	11	502.7
February	485	955	5,045	10	504.5
March	500	1,455	4,545	9	505.0
April	505	1,960	4,040	8	505.0
May	510	2,470	3,530	7	504.3
June	504	2,974	3,026	6	504.3
July	504	3,478	2,522	5	504.4
August	504	3,982	2,018	4	504.5
September	504	4,486	1,514	3	504.7
October	504	4,990	1,010	2	505.0
November	504	5,494	506	1	506.0
December	504	5,998	2	0	

Missouri Department of Health and Senior Services
Division of Community Health
Commodity Supplemental Food Program

Has your eligibility run out for the Supplemental Nutrition Program for Women, Infants and Children (WIC) or do you know older adults in need of supplemental nutrition?

Check out the eligibility criteria for the Commodity Supplemental Food Program (CSFP).



Who does CSFP serve?

If you are pregnant, breastfeeding, have given birth within the last year, have infants or children up to age six living in your home, have limited income, and **are not** participating in the WIC Program or if your eligibility for the WIC program has run out, you may be eligible to participate in the CSFP. Older adults, age sixty or older, who live in low-income households may also participate in CSFP.

What is the CSFP?

The CSFP provides nutritious commodity foods to eligible clients. Each food package is worth about \$45.00 and consists of canned fruits, vegetables, meat, cheese, cereals and grain products and milk products provided to each eligible individual each month.

What income criteria must be met?

Women, infants and children must live in households with a gross annual income at or below 185% of the federal poverty level (\$34,873 for a household of 4). Older adults must have gross annual incomes at or below 130% of federal poverty (\$16,237 for a household of 2)

What do I need to sign up?

Proof of residence (an I.D. with current address such as a driver's license) and a birth certificate (for eligible infants and children and for postpartum or breastfeeding verification). Pregnant women whose pregnancy is not visible will need a note from the doctor verifying the pregnancy.

Where do I go?

For a site near you, call 800-733-6251 or go to http://www.dhss.mo.gov/csfp/sites_csfp.htm.



Do you have trouble making ends meet each month?
Do you sometimes have to choose between buying food and paying bills?
If so, the **Commodity Supplemental Food Program** can help you!!

What is the CSFP?

The CSFP provides nutritious commodity foods to women, infants, children who **are not** participating in the Supplemental Nutrition Program for Women, Infants and Children (the WIC Program) or whose eligibility for the WIC program has run out and older adults who live in low-income households. A food package worth about \$45.00, consisting of canned fruits, vegetables, meat, cheese, cereals and grain products and milk products, is provided to each eligible individual each month.

Who can receive a food package?

- ✓ Pregnant women
- ✓ Postpartum women up to one year after giving birth
(WIC eligibility expires at six months for some women)
- ✓ Breastfeeding women up to one year after giving birth
- ✓ Infants
- ✓ Children up to their sixth birthday
(WIC eligibility expires at their fifth birthday)
- ✓ Older adults, age 60 and above



What income criteria must be met?

Women, infants and children must have gross annual incomes at or below 185% of the federal poverty level (\$34,873 for a household of 4). Older adults must have gross annual incomes at or below 130% of federal poverty (\$16,237 for a household of 2).

What do I need to bring to sign up?

- ▶ Pregnant women - proof of current address and letter from doctor if the pregnancy is not showing.
- ▶ Postpartum women - proof of current address and birth certificate or other record of birth for infant less than one year of age.
- ▶ Breastfeeding women - proof of current address and birth certificate or other record of birth for infant less than one year of age.
- ▶ Infants - proof of current address and birth certificate or other record of birth.
- ▶ Children - proof of current address and birth certificate or other record of birth.
- ▶ Older adults - proof of current address and birth certificate or driver's license.

Where do I go?

For a site near you, call 800-733-6251 or go to
http://www.dhss.mo.gov/csfp/sites_csfp.htm



Missouri Department of Health and Senior Services
Division of Community Health

The Commodity Supplemental Food Program for Seniors



If you are age 60 and older and have limited income, then the Commodity Supplemental Food Program (CSFP) is for you. The CSFP provides nutritious food packages to eligible seniors each month.

How do Seniors qualify?

If you are age 60 or older and have a limited income (\$16,237 annually for a household of two), you are eligible to participate in the CSFP.

What does the CSFP provide?

A food package worth about \$45.00, consisting of canned fruits, vegetables, meat, cheese, cereals and grain products and milk products, is provided each month.

What will I need to get signed up?

Proof of residence (an I.D. with current address), and a driver's license or a birth certificate.

Where do I go?

Call 1-800-733-6251 for a site near you or visit <http://www.dhss.mo.gov/csfp>.

The Commodity Supplemental Food Program
Your "key" to good health.



Missouri Department of Health and Senior Services
Division of Community Health

The Commodity Supplemental Food Program for Seniors



If you are age 60 and older and have limited income, then the Commodity Supplemental Food Program (CSFP) is for you. The CSFP provides nutritious food packages to eligible seniors each month.

How do Seniors qualify?

If you are age 60 or older and have a limited income (\$16,237 annually for a household of two), you are eligible to participate in the CSFP.

What does the CSFP provide?

A food package worth about \$45.00, consisting of canned fruits, vegetables, meat, cheese, cereals and grain products and milk products, is provided each month.

What will I need to get signed up?

Proof of residence (an I.D. with current address), and a driver's license or a birth certificate.

Where do I go?

Call 1-800-733-6251 for a site near you or visit <http://www.dhss.mo.gov/csfp>.

The Commodity Supplemental Food Program
Your "key" to good health.





COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 4

Nutrition Education

Chapter 4	Nutrition Education.....	4.1
	Nutrition Education Evaluation	4.2
	Attachment 4.1 – Nutrition Resources on the Web	
	Attachment 4.2 – Food Program Survey	



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Nutrition Education	Chapter:	4
		Section:	4.1
REFERENCES:	7 CFR 247.8	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To describe the nutrition education component of the Program.

POLICY: Nutrition education shall be thoroughly integrated into Program operations.

PROCEDURES:

- A. The Contractor shall make nutrition education available to all adult participants and to parents or guardians of infant and child participants. Where applicable, nutrition education for child participants is encouraged.
- B. The Contractor shall distribute Attachment 2.3 and 2.4 at the time of certification in order to address the following subject matter:
 1. The importance of the consumption of the supplemental foods by the participant for whom they are prescribed rather than by other family members;
 2. Reference to any special nutrition needs of participants and ways to provide adequate diets;
 3. An explanation of the Program as a supplemental food program;
 4. Information on the use of the supplemental foods and on the nutritional value of the foods;
 5. Information on the benefits of breastfeeding; and
 6. An explanation of the importance of health care.
- C. Nutrition education should be based on the following two broad goals:
 1. To emphasize the relationship of proper nutrition to the total concept of good health, with special emphasis on the nutritional needs of pregnant, postpartum and breastfeeding women, infants and children under 6 years of age and elderly persons age 60 and over; and
 2. To assist participants in making positive changes in food habits, resulting in improved nutritional status and in the prevention of nutrition related problems through maximum use of the supplemental food packages and other nutritious foods. This is to be presented within the context of ethnic, cultural and



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Nutrition Education	Chapter: 4
	Section: 4.1
REFERENCES: 7 CFR 247.8	Page: 2 of 2
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geographical preferences. Consideration should also be given to tailoring nutrition education to meet any limitations experienced by groups of participants, such as lack of running water, lack of electricity, and limited cooking or refrigeration facilities.

- D. Nutrition education resources are available free or at low cost to the local agencies through sources listed on Attachment 4.1 and at <http://www.dhss.mo.gov/csfp/> under resources. A variety of pamphlets and brochures are available for use with WIC clients and with Food Stamp households through the Missouri Nutrition Network that promotes healthful eating habits, including principles from the Food Guide Pyramid, the Dietary Guidelines for Americans, and the Five A Day Program.
- E. Supplemental foods may be used in food demonstrations in conjunction with nutrition education and when used primarily for the participants in the program. Supplemental foods may not be used for outreach, refreshments for participants, or any other such purpose.
- F. Supplemental foods may not be provided to any other community agency or facility for any purpose whatsoever, unless such agency has entered into a signed written agreement with the Department or Contractor to provide nutrition education services.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Nutrition Education Evaluation	Chapter:	4
		Section:	4.2
REFERENCES:	7 CFR 247.5(a)(5) and 7 CFR 247.8	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To establish a systematic procedure to obtain participant input and to determine the effectiveness of the nutrition education efforts.

POLICY: Local agencies shall distribute the Food Program Survey in accordance with State Agency guidance.

PROCEDURES:

- A. The State shall provide copies of the Food Program Survey (Attachment 4.2) to the Local agencies for distribution to CSFP participants during the test month of November each year.
- B. The Local agencies shall assure the surveys are distributed with the CSFP food packages during the month of November.
- C. Each distribution site shall provide space for the comfortable completion of the survey and have sufficient pencils or pens available.
- D. Surveys should be completed and collected on site as part of the CSFP distribution process. Distribution site personnel shall offer the survey to each CSFP participant as the food packages are distributed.
- E. Site personnel shall explain to each participant receiving a survey that information provided will be kept strictly confidential and will be used to improve the quality and effectiveness of the nutrition education efforts.
- F. If a participant is unable to complete the survey or unable to read, offer assistance with completing the forms.
- G. If a participant refuses a survey; or if they have difficulty reading or completing the survey:
 1. Please offer assistance to read the questions or help with completing the forms, and distribution site staff initial the top to indicate you assisted the participant in completing the forms.
 2. Please line through the survey to indicate it was offered to an individual who refused to complete the form;



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Nutrition Education Evaluation	Chapter:	4
		Section:	4.2
REFERENCES:	7 CFR 247.5(a)(5) and 7 CFR 247.8	Page:	2 of 2
		Revised:	8-2-04

3. If practical, please mark the participant's apparent gender and ethnicity (based on visual assessment) for those surveys that were refused.
- H. When sites complete food distribution for the month of the survey, return the surveys in self addressed postage paid envelope provided for data entry and analysis. A report for the results will be provided within 90 days.

Nutrition Resources on the Web

<http://www.nutrition.gov>

Your complete guide to nutrition and health information on Federal Government Websites.

<http://www.fns.usda.gov/fdd/>

USDA's Food Distribution website.

<http://www.dhss.mo.gov/MissouriNutrition/>

The Division of Nutritional Health and Services section of the Missouri Department of Health and Senior Services website.

<http://www.nal.usda.gov/fnic/Fpyr/pyramid.html>

Food Guide Pyramid resources.

<http://navigator.tufts.edu/>

The *Tufts University Nutrition Navigator* is designed to help you sort through the large volume of nutrition information on the Internet and find accurate, useful nutrition information you can trust.

<http://nutritionforkids.com>

Sponsored by 24 Carrot Press. Highlights their books, teaching kits or other resources, organized by topic. Provides news, articles, tips, recipes and *more*, including their FREE Feeding Kids Newsletter. The weekly carrot and "carrots" archive provides useful tips and quick updates. (Scored 21 out of 25 possible points by Tufts)

<http://outreach.missouri.edu/hes/food.htm>

The college of Human Environmental Sciences Outreach and Extension of the University of Missouri-Columbia. Our mission is helping consumers of all ages improve their health and quality of life by selecting nutritious foods and adopting healthy habits.

Food Program Survey

We are using this survey to improve the Missouri Commodity Supplemental Food Program. Your answers will be kept strictly confidential and will not affect your benefits.

Age: _____ Sex: ☐ Male ☐ Female Zip Code (Home address): _ _ _ _ _






Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race: (Please mark one or more)

☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American






☐ Native Hawaiian or Other Pacific Islander ☐ White

Please check mark the column that indicates how you feel about the items below.

	Strongly Agree ₁ 	Agree ₂ 	Neutral ₃ 	Disagree ₄ 	Strongly Disagree ₅ 
1. I would like to know more about good nutrition and healthy eating.					
2. I need to know how to prepare the food in my monthly food box.					
3. The handouts I receive with my monthly food boxes are easy to read and understand.					
4. The handouts I receive with my monthly food boxes help me eat right.					
5. The handouts I receive with my monthly food boxes help me use all the food provided.					
6. I would attend a class on nutrition or cooking.					
7. I have problems with lack of running water.					
8. I have problems with lack of electricity.					
9. I have limited cooking equipment.					

PLEASE TURN OVER

Please check mark the column that indicates how you feel about the items below.

	Strongly Agree ₁ 	Agree ₂ 	Neutral ₃ 	Disagree ₄ 	Strongly Disagree ₅ 
10. I have limited refrigerator space.					
11. In the last 12 months I have worried about having enough money to buy food.					
12. In the last 12 months I cut the size of meals or skipped meals due to lack of money for food.					
13. I can buy fresh fruits and vegetables any time of the year.					
14. Eating a good diet can help keep me healthy.					
15. For good health I should eat at least 5 servings of vegetables and fruits every day.					
16. For good health I should eat at least 2-3 servings of meat or protein every day.					
<p>17. Check the number of servings of vegetables and fruits you eat each day.</p> <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/>₁ 1-2 <input type="checkbox"/>₂ 3-4 <input type="checkbox"/>₃ 5 + <input type="checkbox"/>₄ 0 <input type="checkbox"/>₅ Don't Know/Unsure </div>					
<p>18. How do you describe your weight?</p> <div style="display: flex;"> <div style="flex: 1;"> <p>Current weight: _____</p> <p>Current Height: _____</p> </div> <div style="flex: 1;"> <input type="checkbox"/>₁ Very underweight <input type="checkbox"/>₂ Slightly underweight <input type="checkbox"/>₃ About the right weight <input type="checkbox"/>₄ Slightly overweight <input type="checkbox"/>₅ Very overweight </div> </div>					
19. Would you like to receive other information with your food boxes?					
20. Do you have comments or concerns about the program in general?					

THANKS FOR YOUR HELP



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 5

Commodity Management

Chapter 5	Commodity Management	
	Multi-food Ordering and Receiving.....	5.1
	Ordering and Receiving Direct Shipments	5.2
	Food Package Assembly	5.3
	Food Package Distribution.....	5.4
	Inventory Control and Reporting	5.5
	Attachment 5.1 – FNS-53 Multi-food Requisition	
	Attachment 5.2 – Food Order Worksheet	
	Attachment 5.3A – Food Package Maximum Monthly Distribution Rates	
	Attachment 5.3B – Food Package Maximum Monthly Distribution Rates	
	Attachment 5.4 –FNS 153 Monthly Report CSFP & Quarterly Financial Report	
	Attachment 5.5 – Physical Inventory Worksheet	



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Multi-food Ordering and Receiving	Chapter:	5
		Section:	5.1
REFERENCES:	7 CFR 247	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To outline the Multi-food ordering and receiving process for the Commodity Supplemental Food Program in Missouri.

POLICY: The State agency manages the multi-food ordering process for the Commodity Supplemental Food Program. The local agencies order, receive and warehouse the foods.

PROCEDURES:

- A. The State receives the monthly offering information from USDA-MPRO, usually on the first day of the month and two months prior to the delivery month. For example: the food offering for the month of June is received by the state on or about April 1st.
- B. The State prepares the food order form, FNS Form 53-Multifood Requisition, Attachment 5-1, and sends it electronically to the local agencies along with the Food Order Worksheet, Attachment 5.2.
- C. The local agency completes the order on the FNS Form 53 for the delivery month with the assistance of the Food Order Worksheet.
 1. Anticipated caseload is entered on the worksheet to determine the number of cases to be ordered for each food type.
 2. The local agencies should consider existing and anticipated inventory levels when determining the number of cases to order.
 3. At least one extra month supply of each food type should be on hand at all times. On rare occasions orders cannot be filled at requested levels. The extra supply is needed to assure that complete packages can be assembled.
- D. The local agency electronically submits the FNS Form 53 to the State agency by the specified deadline, usually the 15th of the same month. For example: the FNS Form 53 for the food to be delivered the month of June is due to the state on or about April 15th.
- E. The State reviews FNS Form 53 from all local agencies and submits them electronically to USDA-MPRO by the specified deadline, usually the 18th of the same month.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Multi-food Ordering and Receiving	Chapter: 5
	Section: 5.1
REFERENCES: 7 CFR 247	Page: 2 of 2
	Revised: 8-2-04

- F. USDA-MPRO enters all Multi-food orders into the national computerized ordering database currently referred as PCIMS and sends the Multi-food Requisition Report, generated by the database, to the states, usually by the end of the same month.
- G. The State reviews the Multi-food Requisition Report and notifies MPRO if any discrepancies are identified.
- H. The PCIMS database determines the adequacy of current supplies to fill the food orders nation-wide. If shortages exist:
1. A fair share amount will be assigned to each state. USDA-MPRO will notify the State.
 2. The State will coordinate with the local agencies to allocate Missouri's fair share amount and to make appropriate substitutions.
 3. Revised Multi-food Requisition Reports may be issued.
- I. The national multi-food contractor, currently Americold Logistics, will determine truckload deliveries based on the final orders in PCIMS. Consignee Receipts (CR) will be generated and duplicate copies sent to the State, usually by the 20th of the month before the delivery month. For example, the CRs for June food deliveries will usually be received by the 20th of May.
- J. The State reviews the CRs, retains one copy and mails the other copy to the local agency. The CR is used by the local agency as the receiving documentation. The CRs may be faxed and then mailed if received too late to guarantee receipt by the 1st of the month.
- K. The truck driver will contact the local agency to schedule deliveries. The local agency must follow the instructions in the USDA publication "Receipting for USDA Commodities, Household Consignee Version (Multi-food Shipments from Warehouse)" dated July 2001. The Consignee Receipt must be completed as food deliveries arrive.
- L. If overages, shortages or damage are noted, the local agency will notify the State and complete FNS Form 57 in accordance with the USDA publication cited in K above.
- M. The local agency must fax the completed Consignee Receipts to the State agency after all truckloads are received.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Direct Shipment Ordering and Receiving	Chapter:	5
		Section:	5.2
REFERENCES:	7 CFR 247	Page:	1 of 2
		Revised:	8-12-04

PURPOSE: To outline the process for ordering and receiving direct shipments for the Commodity Supplemental Food Program in Missouri.

POLICY: The State agency manages the direct shipment food ordering process for the Commodity Supplemental Food Program. The local agencies order, receive and warehouse the foods.

PROCEDURES:

- A. The State receives the quarterly offering information from USDA-MPRO, usually around the first day of the last month of the quarter and two quarters prior to the delivery quarter. For example: the food offering for the quarter of Jan-Mar is received by the state on or about September 1st.
- B. The State agency monitors items offered and quantities ordered by all contractors with the intent to utilize direct shipments when possible. Direct shipments may be split between as many as three locations, but the minimum delivery to any location is 25% of a truckload.
- C. The State prepares the food order plan projecting out several quarters. The local agencies receiving direct shipments are provided a copy of the plan electronically to review and comment.
- D. The local agency notifies the State agency via email by the designated deadline if additions or deletions to the direct delivery plan are desired.
- E. The State enters and tracks direct shipment orders into the USDA Electronic Commodity Ordering System (ECOS).
- F. The USDA Farm Service Agency's Kansas City Commodity Office will generate a Forwarding Notice (FN) and sends duplicate copies to the State.
- G. The State reviews the FN, retains one copy and mails the other copy to the local agency. The FN is used by the local agency as the receiving documentation. The FN may be faxed and then mailed if received too late to guarantee receipt by the 1st of the delivery month.
- H. The truck driver will contact the local agency to schedule deliveries. The local agency must follow the instructions in the USDA publication "Receiving for USDA



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Direct Shipment Ordering and Receiving	Chapter:	5
		Section:	5.2
REFERENCES:	7 CFR 247	Page:	2 of 2
		Revised:	8-12-04

Commodities, Direct Shipment Version (Shipments to State Facilities)” dated September 2001. The FN must be completed as shipments arrive.

- I. If overages, shortages or damage are noted, the local agency will notify the State agency and complete FNS Form 57 in accordance with the USDA publication cited in K above.
- J. The local agency must fax the completed FN to the State agency after the truckload is received.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Food Package Assembly	Chapter:	5
		Section:	5.3
REFERENCES:	7 CFR 247.6(j)(iv)	Page:	1 of 1
		Revised:	8-19-04

PURPOSE: To provide guidelines for the assembling of food packages for the Commodity Supplemental Food Program in Missouri.

POLICY: Local agency shall assemble food packages in accordance with Missouri Department of Health and Senior Services CFSP Food Package Monthly Distribution Rates and program regulations.

PROCEDURES:

- A. Foods required to be included in food packages, based on age and category, are listed in the Missouri Department of Health and Senior Services CSFP Food Package Maximum Monthly Distribution Rates, Effective August 2004, Attachments 5.3A and 5.3B.
- B. Partial food packages MAY NOT be distributed.
- C. Different packages must be assembled for the following categories:
 - 1. Infants 0-3 months
 - 2. Infants 4-12 months
 - 3. Children 1 year of age
 - 4. Children age 2 until 6 year birth month.
 - 5. Pregnant and breastfeeding women
 - 6. Elderly and non-breastfeeding postpartum women
- D. A food package tracking system must be devised to identify the content of each package so that an accurate by unit end of the month inventory can be accomplished (see Policy 5.5). The food package tracking system should identify the following:
 - 1. Either the pack month and year or the intended distribution month and year
 - 2. The category (see C. above)
 - 3. The specific food items in the package. Document the contents of the first package and assign an alpha or numeric code. If there is a change in food items during package assembly, for instance the corn runs out and green beans are substituted, a new code should be assigned and the new contents documented for that code.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Food Package Distribution	Chapter:	5
		Section:	5.4
REFERENCES:	7 CFR 247	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To provide guidelines for the distribution of food packages for the Commodity Supplemental Food Program in Missouri.

POLICY: Local agency shall assure that supplemental food packages are distributed in accordance with Program regulations.

PROCEDURES:

- A. Local agencies are responsible for recruiting and/or establishing food distribution sites. Each site must conform to local, state and federal health standards and must enter into an agreement with the local agency to assure proper food handling, storing, and distribution procedures and recording requirements are maintained.
- B. The local agency shall provide the name and address of each certification, food distribution and storage site under its jurisdiction either with the local agencies application for the Commodity Supplemental Food Program or when written agreements are established.
- C. The written agreements with other agencies shall:
 1. State the Program responsibilities of the other agency.
 2. Be approved by the State.
 3. Be on file with both the local agency and the State.
- D. Distribution sites, under agreement with the food banks, shall assure that adequate care and security is provided for the food while in their possession. Foods will be stored in adequate and secured areas at each distribution site to safeguard them from spoilage, infestation, fire and other losses. These storage areas may also be used to store The Emergency Food Assistance Program (TEFAP) commodities or other USDA foods for local use and distribution. Inventory and distribution amounts as well as participant data will be reported to the local agency each month.
- E. Participants will pick up food packages at their designated distribution site once each month during the distribution site's normal hours of operation. Staff at the site will verify recipient eligibility prior to distributing the foods and must require participant or proxy to sign for the receipt of food packages.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Inventory Control and Reports	Chapter:	5
		Section:	5.5
REFERENCES:	7 CFR 247	Page:	1 of 2
		Revised:	8-12-04

PURPOSE: To outline inventory control and reporting requirements for the Commodity Supplemental Food Program.

POLICY: Local agency staff members are responsible for maintaining a system that will account for all foods received and distributed, in accordance with Program regulations and for submitting required reports.

PROCEDURES:

- A. The state provides an electronic spreadsheet facsimile of the FNS 153, Monthly Report of the CSFP and Quarterly Financial Status Report, Attachment 5.4, to each local agency. The state maintains a master spreadsheet for each local agency and forwards updates periodically. The FNS 153 carries over the ending inventory from the previous month to provide the beginning inventory for the report month. Local agencies must enter food receipts, distributions or issuances and all other commodity activity for the report month.
- B. Local agencies must conduct a per unit month-end physical inventory of all commodity foods on hand including the content of undistributed food packages located in the warehouse and at distribution sites. For a sample inventory form, see Attachment 5.5 Physical Inventory.
- C. Local agencies shall compare the agency-wide per unit physical inventory with the ending inventory calculated on the FNS 153 (see A. above). The ending inventory calculated on the FNS 153 must equal the physical inventory amounts.
 1. If the physical inventory differs from the ending inventory reflected in column 15 (when the FNS 153 is completed through column 13 per A above), the local agency must show positive or negative adjustments in column 14 to cause the calculated ending inventory to agree with the actual physical inventory amounts.
 2. If adjustments reflected in column 14 are greater than the a few cases of a single product, a written explanation is required.
- D. The FNS 153 must be submitted to the State by the 20th day of the following month.
- E. The local agency must report food losses due to damage, spoilage or infestation in column 12(C) of the FNS 153. In the event there are losses of more than a few cases of a single product or more than \$100.00, state approval is required before the food can be destroyed.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Inventory Control and Reports	Chapter:	5
		Section:	5.5
REFERENCES:	7 CFR 247	Page:	2 of 2
		Revised:	8-12-04

- F. If neglect, carelessness, and/or willful mishandling cause damage to or loss of USDA donated food or if USDA donated foods are used or distributed improperly, local agencies, warehouse personnel and other persons are subject to a claim determination and the corresponding repayment responsibility.

U.S. Department of Agriculture
Multi-Food Requisition For JUNE 2004

DA Name	Missouri Depart of Health & Senior S	Quarter	Q3	FNS USE ONLY
Date	DUE to MDHSS by Apr 15, 2004	Delivery Year	F	Req No. <input style="width: 80px;" type="text"/>
Signature	_____	Comm Group	93	
		DA Code	329	Received _____
		Outlet	CSFP	To PCIMS _____
		End Ship Date	6/15/2004	
		Entity Code	_____	
		City	_____	
Use Only For JUNE 2004 Orders				

REMARKS:					
MAXIMUM TRUCK WT: 38,000 lbs. - ORDERS LESS THAN 30,000 lbs. SUBJECT TO USDA APPROVAL					TOTAL ORDER WT: 0
FNS CODE	SHORT TITLE	PACK SIZE	NO. CASES ORDERED	CASE NET WT	TOTAL WT
A059	BEANS GREEN 300	24/#300 CAN		21.75	0
A090	BEANS VEG 300	24/#300 CAN		24.00	0
A098	CARROTS 300	24/#300 CAN		22.50	0
A119	CORN KERNEL 300	24/#300 CAN		22.90	0
A122	CORN CREAM 300	24/#300 CAN		22.50	0
A144	PEAS 300	24/#300 CAN		22.50	0
A164	PUMPKIN 300	24/#300 CAN		22.50	0
A167	SPINACH 300	24/#300 CAN		21.00	0
A170	POTATOES SLC 300	24/#300 CAN		24.00	0
A196	POTATOES DEHY 12	12/1 LB PKG		12.00	0
A223	SWEET POTATOES 300	24/#300 CAN		22.50	0
A240	TOMATOES 300	24/#300 CANS		21.75	0
A279	CRNBRY APPLE J	12/46 OZ		37.50	0
A280	GRAPEFRUIT J	12/46 OZ CAN		37.00	0
A282	APPLE J	12/46 OZ CAN		37.50	0
A284	GRAPE JUICE 46	12/46 OZ CTN		38.20	0
A285	GRAPE J	12/46 OZ CAN		38.00	0
A286	PINEAPPLE J	12/46 OZ CAN		37.70	0
A290	TOMATO J	12/46 OZ CAN		36.50	0
A300	ORANGE J	12/46 OZ CAN		37.50	0
A351	APPLESAUCE 300	24/#300 CAN		22.50	0
A353	APRICOTS HALVES 300	24/#300 CAN		22.50	0
A403	F COCKTAIL 300	24/#300 CAN		22.50	0
A411	PEACHES CLING 300	24/#300 CAN		22.50	0
A437	PEARS 300	24/#300 CAN		22.50	0
A446	PINEAPPLE 2	24/#2 CAN		30.00	0
A501	RAISINS 24 (P Code)	24/15 OZ PKG		22.50	0
A562	CHICKEN CND	24/29 OZ CAN		43.50	0
A570	EGG MIX 6	48/6 OZ PKG		18.00	0
A590	BEEF STEW CHUNKY	24/24 OZ CAN		36.00	0
A610	BEEF NJ	24/29 OZ CAN		43.50	0
A630	PORK NJ	24/29 OZ CAN		43.50	0
A743	TUNA 12	24/12 OZ CAN		18.00	0
A910	BEANS BLKEYE 2	12/2 LB PKG		24.00	0

Food Order Worksheet

Revised August 2004

	Percent	0.1%	0.1%	1.0%	1.0%	1.0%	96.9%		
	Pkg/Case	Infants 0-3 months	Infants 4-12 months	Children 1 yr of age	Children 2 up 6th birthday	Women Pregnant/ Breastfeeding	Nonbreastfd. Postpartum Elderly	Total Units to Order	Total Cases to Order
Enter estimated no.to be served		1	1	10	10	10	1000	1032	2,091.7
INFANT FORMULA, POWDERED 14.1 OUNCE CAN	6	9	9					18	3.0
CEREAL, DRY READY TO EAT * 12 TO 18 OZ PACKAGE	12			20	20	20	2000	2060	171.7
or FARINA * - 14 OZ PACKAGE	24			20	20	20	2000	2060	85.8
OATMEAL - 3 LB PACKAGE	12			10	10	10	1000	1030	85.8
or GRITS ** - 5 LB PACKAGE				5	5	5	500	515	
INFANT CEREAL - 8 OZ PACKAGE	12		2					2	0.2
JUICE - 46 OZ CAN	12			40	40	50	3000	3130	260.8
MEAT/POULTRY - 29 OZ CAN &	24			10	10	10	1000	1030	42.9
BEEF STEW CHUNKY - 24 OZ CAN	24			10	10	10	1000	1030	42.9
or MEATBALL STEW-15 OZ CAN***	24			20	20	20	2000	2060	85.8
or TUNA FISH - 12 OZ CAN	24			20	20	20	2000	2060	85.8
or SALMON - 14.75 OZ CAN	24			20	20	20	2000	2060	85.8
or EGG MIX, DRY - 6 OZ PKG	48			20	20	20	2000	2060	42.9
MILK: EVAPORATED-12 OZ CANS ****	24			330					-
or EVAPORATED-12 OZ CAN*****	24				50	110	3000	3160	131.7
and INSTANT NONFAT DRY- 25.6 OZ PKG *****	12				10.0	10.0	1,000.0	1020	85.0
PEANUT BUTTER - 18 OZ. JAR	12			10	10	10	1000	1030	85.8
or PEAS/BEANS, DRY - 2 LB PKG	12			10	10	10	1000	1030	85.8
MACARONI - 1 LB PKG or	24			20	20	20	2000	2060	85.8
POTATOES, DEHY - 1 LB PKG or	12			10	10	10	1000	1030	85.8
SPAGHETTI - 2 LB PKG or	12			10	10	10	1000	1030	85.8
RICE - 2 LB PKG or	24			10	10	10	1000	1030	42.9
GRITS - 5 LB PKG **	8			5	5	5	500	515	64.4
PROCESS AMERICAN CHEESE - 2 LB PACKAGE	12			10	10	10	1000	1030	85.8
FRUITS - 15 OR 16 OZ CAN	24			20	20	40	2000	2080	86.7
VEGETABLES - 15 OR 16 OZ CAN	24			40	40	60	4000	4140	172.5

mix and
match cereal
and farina

or provide
one oatmeal
or serve
grits only
every other month

one can
or each
or
or mix and
match
or
or
or

1
serve monthly
while bonus
supply lasts

one per month
or
one per month

serve 2
or macaroni
or one
or potato,
spaghetti,
or rice, or
1 grit every
other month

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
CSFP FOOD PACKAGE
MAXIMUM MONTHLY DISTRIBUTION RATES
EFFECTIVE AUGUST 1, 2004

COMMODITY	INFANTS		CHILDREN 1 YEAR OF AGE UP TO THEIR SIXTH BIRTHDAY	PREGNANT/ BREASTFEEDING WOMEN	NONBREASTFEEDING/ POSTPARTUM WOMEN AND ELDERLY
	0-3 MONTHS	4-12 MONTHS			
INFANT FORMULA, POWDERED 14.1 OZ CAN	9 CANS	9 CANS			
CEREAL, DRY READY TO EAT * 18 OZ PACKAGE			2 PACKAGES or	2 PACKAGES or	2 PACKAGES or
or FARINA * - 14 OZ PACKAGE			2 PACKAGES or	2 PACKAGES or	2 PACKAGES or
or GRITS ** - 5 LB PACKAGE			1 PKG EVERY OTHER MONTH or	1 PKG EVERY OTHER MONTH or	1 PKG EVERY OTHER MONTH or
OATMEAL - 3 LB PACKAGE			1 PACKAGE	1 PACKAGE	1 PACKAGE
INFANT CEREAL - 8 OZ PACKAGE		2 PKGS			
JUICE - 46 OZ CAN			4 CANS	5 CANS	3 CANS
MEAT/POULTRY - 29 OZ CAN & BEEF STEW CHUNKY - 24 OZ CAN			1 CAN or "	1 CAN or "	1 CAN or "
or MEATBALL STEW-15 OZ CAN***			2 CANS or	2 CANS or	2 CANS or
or TUNA FISH - 12.5 OZ CAN			2 CANS or	2 CANS or	2 CANS or
or SALMON - 14.75 OZ CAN			2 CANS or	2 CANS or	2 CANS or
or EGG MIX, DRY - 6 OZ PKG			2 PKGS	2 PKGS	2 PKGS

COMMODITY	INFANTS 0-3 MONTHS 4-12 MONTHS	CHILDREN 1 YEAR OF AGE UP TO THEIR SIXTH BIRTHDAY		PREGNANT/ BREASTFEEDING WOMEN	NONBREASTFEEDING/ POSTPARTUM WOMEN AND ELDERLY
MILK: EVAPORATED-12 OZ CANS **** or EVAPORATED-12 OZ CAN***** and INSTANT NONFAT DRY- 25.6 OZ PKG *****		1 year of age	2 years old up to 6th birthday	11 CANS and 1 PKG EVERY OTHER MONTH	3 CANS and 1 PKG EVERY OTHER MONTH
		33 CANS each mo.	5 CANS each month and 1 PKG EVERY OTHER MONTH		
PEANUT BUTTER-18 OZ CAN or PEAS/BEANS, DRY - 2 LB PKG		1 CAN EVERY MONTH or 1 PKG PER MONTH		1 CAN EVERY MONTH or 1 PKG PER MONTH	1 CAN EVERY MONTH or 1 PKG PER MONTH
POTATOES, DEHY - 1 LB PKG or MACARONI - 1 LB PKG or SPAGHETTI - 2 LB PKG or RICE - 2 LB PKG or GRITS - 5 LB PKG **		1 PKG or		1 PKG or	
		2 PKG or		2 PKG or	
		1 PKG or		1 PKG or	
		1 PKG or		1 PKG or	
		1 PKG EVERY OTHER MONTH		1 PKG EVERY OTHER MONTH	
PROCESS AMERICAN CHEESE - 2 LB PACKAGE		1 PKG		1 PKG	1 PKG
FRUITS - 15 OR 16 OZ CAN		2 CANS		4 CANS	2 CANS
VEGETABLES - 15 OR 16 OZ CAN		4 CANS		6 CANS	4 CANS

-

NOTES:

*ADDITIONAL PACKAGE SIZES MAY BE AVAILABLE. THE DISTRIBUTION RATE FOR ALL SIZES IS 2 PKGS PER MONTH. A COMBINATION OF 1 PKG DRY READY TO EAT CEREAL AND 1 PKG OF FARINA MAY BE PROVIDED.

**THE DISTRIBUTION RATE FOR GRITS IS 5 POUNDS EVERY OTHER MONTH AS A CEREAL OR SIDE DISH SUBSTITUTE.

***PARTICIPANTS CAN SELECT TWO ITEMS PER MONTH FROM THE FOLLOWING FOOD ITEMS: TUNA, MEATBALL STEW, SALMON AND EGG MIX.
FOR EXAMPLE, PARTICIPANTS CAN SELECT TWO CANS OF TUNA OR ANY OF THE FOLLOWING COMBINATIONS FOR A MONTH:

ONE CAN TUNA AND ONE CAN OF MEATBALL STEW

or

ONE CAN TUNA AND ONE CAN OF SALMON

or

ONE CAN TUNA AND ONE PACKAGE OF EGG MIX

****CHILDREN 1 YEAR OF AGE UP TO THEIR SECOND BIRTHDAY MAY RECEIVE: 33 12 OZ CANS OF EVAPORATED MILK EACH MONTH.

*****CHILDREN 2 YEARS OF AGE UP TO THEIR SIXTH BIRTHDAY MAY RECEIVE A COMBINATION OF 5 12 OZ CANS OF EVAPORATED MILK EACH MONTH AND 1 25.6 OZ PACKAGE OF INSTANT NONFAT DRY MILK EVERY OTHER MONTH.

**COMMODITY SUPPLEMENTAL FOOD PROGRAM
MAXIMUM FOOD DISTRIBUTION RATES**

Attachment 5.3B

INFANTS

COMMODITY	0 THROUGH 3 MONTHS	4 THROUGH 12 MONTHS
INFANT FORMULA, POWDERED 14.1 OZ. CAN	9 CANS	9 CANS
INFANT CEREAL 8 OUNCE PACKAGE		2 PACKAGES

CHILDREN 1 YEAR OF AGE UP THEIR SIXTH BIRTHDAY

COMMODITY	DISTRIBUTION RATES	
CEREAL, DRY, READY TO EAT ¹ 18 OUNCE PACKAGE	2 PACKAGES, OR	
OR FARINA ¹ – 14 OUNCE PACKAGE	2 PACKAGES, OR	
OR GRITS ² – 5 POUND PACKAGE	1 PACKAGE EVERY OTHER MONTH, OR	
OATMEAL – 3 POUND PACKAGE	1 PACKAGE	
JUICE – 46 OUNCE CAN	4 CANS	
MEAT/POULTRY - 29 OUNCE CAN, AND BEEF STEW CHUNKY – 24 OUNCE CAN	1 CAN, OR	
OR MEATBALL STEW ³ – 15 OUNCE CAN	2 CANS, OR	
OR TUNA FISH – 12.5 OUNCE CAN	2 CANS, OR	
OR SALMON – 14.75 OUNCE CAN	2 CANS, OR	
OR EGG MIX, DRY – 6 OUNCE PACKAGE	2 PACKAGES	
PEANUT BUTTER – 18 OZ. JAR	1JAR EVERY MONTH, OR	
OR PEAS/DRY BEANS, 2 POUND PACKAGE	1 PACKAGE PER MONTH	
POTATOES, DEHYDRATED – 1 POUND PKG.	1 PACKAGE, OR	
OR MACARONI – 1 POUND PACKAGE	2 PACKAGES, OR	
OR SPAGHETTI – 2 POUND PACKAGE	1 PACKAGE, OR	
OR RICE – 2 POUND PACKAGE	1 PACKAGE, OR	
OR GRITS – 5 POUND PACKAGE ²	1 PACKAGE EVERY OTHER MONTH	
AMERICAN CHEESE – 2 POUND PACKAGE	1 PACKAGE	
FRUITS – 15 OR 16 OUNCE CAN	2 CANS	
VEGETABLES – 15 OR 16 OUNCE CAN	4 CANS	
	1 YEAR OF AGE	2 YEARS UP TO SIXTH BIRTHDAY
EVAPORATED MILK – 12 OUNCE CANS ⁴	33 CANS	
OR EVAPORATED MILK – 12 OUNCE CANS ⁵		5 CANS, AND
AND INSTANT NONFAT DRY MILK 25.6 OUNCES		1 PACKAGE EVERY OTHER MONTH

- Additional package sizes may be available. The distribution rate for all sizes is 2 packages per month. A combination of 1 package dry ready to eat cereal and 1 package of farina may be provided.
- The distribution rate for grits is 5 pounds every other month as a cereal or as a side dish substitute.
- Participants can select two items per month from the following food items: tuna, meatball stew, salmon, and egg mix. For example, participants can select two cans of tuna or any of the following combinations for the month:
 - one can of tuna and one can of meatball stew; or
 - one can of tuna and one can of salmon; or
 - one can of tuna and one package of egg mix.
- Children 1 year of age up to their second birthday may receive 33 12 ounce cans of evaporated milk each month.
- Children 2 years of age up to their sixth birthday may receive a combination of 5 12-ounce cans of evaporated milk each month and 1 25.6 ounce package of instant nonfat dry milk every other month.

**COMMODITY SUPPLEMENTAL FOOD PROGRAM
MAXIMUM FOOD DISTRIBUTION RATES**

PREGNANT AND BREASTFEEDING WOMEN

COMMODITY	DISTRIBUTION RATES
CEREAL, DRY, READY TO EAT ¹ 18 OUNCE PACKAGE	2 PACKAGES, OR
OR FARINA ¹ – 14 OUNCE PACKAGE	2 PACKAGES, OR
OR GRITS ² – 5 POUND PACKAGE	1 PACKAGE EVERY OTHER MONTH, OR
OATMEAL – 3 POUND PACKAGE	1 PACKAGE
JUICE – 46 OUNCE CAN	5 CANS
MEAT/POULTRY - 29 OUNCE CAN, AND BEEF STEW CHUNKY – 24 OUNCE CAN	1 CAN, OR
OR MEATBALL STEW ³ – 15 OUNCE CAN	2 CANS, OR
OR TUNA FISH – 12.5 OUNCE CAN	2 CANS, OR
OR SALMON – 14.75 OUNCE CAN	2 CANS, OR
OR EGG MIX, DRY – 6 OUNCE PACKAGE	2 PACKAGES
PEANUT BUTTER – 18 OZ. JAR	1 JAR EVERY MONTH, OR
OR PEAS/DRY BEANS, 2 POUND PACKAGE	1 PACKAGE PER MONTH
POTATOES, DEHYDRATED – 1 POUND PKG.	1 PACKAGE, OR
OR MACARONI – 1 POUND PACKAGE	2 PACKAGES, OR
OR SPAGHETTI – 2 POUND PACKAGE	1 PACKAGE, OR
OR RICE – 2 POUND PACKAGE	1 PACKAGE, OR
OR GRITS – 5 POUND PACKAGE ²	1 PACKAGE EVERY OTHER MONTH
AMERICAN CHEESE – 2 POUND PACKAGE	1 PACKAGE
FRUITS – 15 OR 16 OUNCE CAN	4 CANS
VEGETABLES – 15 OR 16 OUNCE CAN	6 CANS
EVAPORATED MILK – 12 OUNCE CANS	11 CANS, AND
AND INSTANT NONFAT DRY MILK 25.6 OUNCES	1 PACKAGE EVERY OTHER MONTH

6. Additional package sizes may be available. The distribution rate for all sizes is 2 packages per month. A combination of 1 package dry ready to eat cereal and 1 package of farina may be provided.
7. The distribution rate for grits is 5 pounds every other month as a cereal or as a side dish substitute.
8. Participants can select two items per month from the following food items: tuna, meatball stew, salmon, and egg mix. For example, participants can select two cans of tuna or any of the following combinations for the month:
 - a. one can of tuna and one can of meatball stew; or
 - b. one can of tuna and one can of salmon; or
 - c. one can of tuna and one package of egg mix.

**COMMODITY SUPPLEMENTAL FOOD PROGRAM
MAXIMUM FOOD DISTRIBUTION RATES**

**NONBREASTFEEDING AND POSTPARTUM WOMEN
AND ELDERLY**

COMMODITY	DISTRIBUTION RATES
CEREAL, DRY, READY TO EAT ¹ 18 OUNCE PACKAGE	2 PACKAGES, OR
OR FARINA ¹ – 14 OUNCE PACKAGE	2 PACKAGES, OR
OR GRITS ² – 5 POUND PACKAGE	1 PACKAGE EVERY OTHER MONTH, OR
OATMEAL – 3 POUND PACKAGE	1 PACKAGE
JUICE – 46 OUNCE CAN	3 CANS
MEAT/POULTRY - 29 OUNCE CAN, AND BEEF STEW CHUNKY – 24 OUNCE CAN	1 CAN, OR
OR MEATBALL STEW ³ – 15 OUNCE CAN	2 CANS, OR
OR TUNA FISH – 12.5 OUNCE CAN	2 CANS, OR
OR SALMON – 14.75 OUNCE CAN	2 CANS, OR
OR EGG MIX, DRY – 6 OUNCE PACKAGE	2 PACKAGES
PEANUT BUTTER – 18 OZ. JAR	1JAR EVERY MONTH, OR
OR PEAS/DRY BEANS, 2 POUND PACKAGE	1 PACKAGE PER MONTH
POTATOES, DEHYDRATED – 1 POUND PKG.	1 PACKAGE, OR
OR MACARONI – 1 POUND PACKAGE	2 PACKAGES, OR
OR SPAGHETTI – 2 POUND PACKAGE	1 PACKAGE, OR
OR RICE – 2 POUND PACKAGE	1 PACKAGE, OR
OR GRITS – 5 POUND PACKAGE ²	1 PACKAGE EVERY OTHER MONTH
AMERICAN CHEESE – 2 POUND PACKAGE	1 PACKAGE
FRUITS – 15 OR 16 OUNCE CAN	2 CANS
VEGETABLES – 15 OR 16 OUNCE CAN	4 CANS
EVAPORATED MILK – 12 OUNCE CANS	3 CANS, AND
AND INSTANT NONFAT DRY MILK 25.6 OUNCES	1 PACKAGE EVERY OTHER MONTH

9. Additional package sizes may be available. The distribution rate for all sizes is 2 packages per month. A combination of 1 package dry ready to eat cereal and 1 package of farina may be provided.
10. The distribution rate for grits is 5 pounds every other month as a cereal or as a side dish substitute.
11. Participants can select two items per month from the following food items: tuna, meatball stew, salmon, and egg mix. For example, participants can select two cans of tuna or any of the following combinations for the month:
 - a. one can of tuna and one can of meatball stew; or
 - b. one can of tuna and one can of salmon; or
 - c. one can of tuna and one package of egg mix.

10/6/2004

Attachment 5.4

Month: February 2003

Name of Food Bank

DA CODE 329

Infants (0-3) Mos (N) a	Infants (4-12) Mos (I) (b)	Children 1 yr old (T)	Children 2 thru 5 yrs (C)	P/BF Women P/B	PP Women (L)	Total WIC's	Total Elderly (S)	Total CSFP Participants
			27		1	28	1,159	1,187

6. Commodity Name	6A. Code	Units per case	Cases Received	6B. Pack Size	7 SA & LA Beg. Inventory	8 Receipts	9	10	11		12 Commodity Activity				13	14 Adjustments		15 Ending Inventory
							Redonations In	Total Inventory Available	Commodity Issuance		Total Units Issued (A)	Redonations Out (B)	Food Loss (C)	Nut. Ed (D)	Total Activity			
									W-I-C (A)	Elderly (B)						Pos Adj (A)	Neg Adj (B)	
Green Beans 300	A059	24	126	24/300 can	9,000	3,024		12,024		994	994				994	8		11,038
Carrots 300	A098	24	125	24/300 can	8,998	3,000		11,998		994	994		2		996			11,002
Corn Kernel 300	A119	24		24/300 can	432	-		432	4	334	338				338			94
Pumpkin 300	A164	24		24/300 can	1,813	-		1,813	54	1,326	1,380		1		1,381			432
Swt Potatoes 300	A223	24		24/300 can	1,348	-		1,348	50	992	1,042				1,042			306
Cranberry-Apple J	A279	12		12/46 oz.	949	-		949	36	259	295				295	1		655
Grapefruit J	A280	12		12/46 oz.	-	-		-			-				-			-
Apple J	A282	12		12/46 oz.	7,002	-		7,002	72	870	942		2		944		2	6,056
Tomato J	A290	12	120	12/46 oz.	3,654	1,440		5,094		1,626	1,626				1,626			3,468
Cranberry J Con	A297	12		12/11.5 oz.	-	-		-			-				-			-
Orange J	A300	12	259	12/46 oz.	5,694	3,108		8,802		725	725		2		727	1		8,076
Applesauce 300	A351	24	126	24/300 can	6,474	3,024		9,498	4	352	356		2		358	2		9,142
Apricot Halves 300	A353	24		24/#300 can	-	-		-			-				-			-
F Cocktail 300	A403	24		24/300 can	4,446	-		4,446	50	1,968	2,018				2,018	4		2,432
Chicken CND	A562	24	63	24/29 oz.	4,536	1,512		6,048		497	497				497			5,551
Beef NJ	A610	24		24/29 oz.	614	-		614	27	496	523				523			91
Pork NJ	A630	24		24/29 oz.	214	-		214		167	167				167			47
Cheese 24	B061	12	125	12/2 lbs.	5,266	1,500		6,766	27	1,160	1,187				1,187			5,579
Evap 12	B081	48		48/12 FL oz.	-	-		-			-				-			-
INSTANT 2	B095	12	125	12/25.6 oz.	4,013	1,500		5,513	18	984	1,002				1,002	40		4,551
Evap 24	B117	24	193	24/12 FL oz.	18,390	4,632		23,022	135	3,480	3,615		1		3,616		1	19,405
Formula Powder 14.1	B158	6		6/14.1 oz.	96	-		96			-				-			96
Farina	B160	24		24/14 oz.	-	-		-			-				-			-
Cereal Infant R8	B161	12		12/8 oz.	24	-		24			-				-			24
Macaroni 1	B425	24	125	24/1 lbs.	8,988	3,000		11,988	36	994	1,030		6		1,036	6		10,958
Oats 3	B445	12		12/3 lbs.	10	-		10	7		7				7			3
PB 2	B470	24		24/2 lbs.	-	-		-			-				-			-
PB Smith 2	B474	12	125	12/2lbs.	5,257	1,500		6,757	27	1,160	1,187		8		1,195	2		5,564
Chunky RDU-Fat 2	B488	24		24/2 lbs.	-	-		-			-				-			-
Rice 2	B510	24		24/2 lbs.	-	-		-			-				-			-
Spaghetti 2	B835	12		12/2 lbs.	760	-		760	9	663	672				672			88
Cereal Oats 15	B853	12	250	12/15 oz.	7,174	3,000		10,174	40	992	1,032				1,032		12	9,130
Cereal Oats 15.5	B854	12		12/15.5 oz.	-	-		-			-				-			-
Cereal Crn & Rice 12	B855	14		14/12 oz.	3,136	-		3,136		994	994				994			2,142
Cereal Oats	B860	24		24/15 oz.	-	-		-			-				-			-
Cereal Oats 16	B861	12		12/16 oz.	-	-		-			-				-			-
Cereal Rice	B865	14		14/13.5 oz	224	-		224			-				-			224
Cereal Wheat RTE 16	B872	14		14/16 oz.	-	-		-			-				-			-
Cerl Crn Flk 18	B879	12		12/18 oz.	428	-		428		334	334				334			94
				-	-	-		-			-				-			-

16. REMARKS (PROVIDE EXPLANATION AS REQUESTED PER INSTRUCTIONS) (ATTACH ADDITIONAL SHEETS AS DEEMED NECESSARY.)

17. SIGNATURE	18. TITLE	19. DATE	20. CSFP ADMIN	A. OUTLAYS	B. UNLIQ. OBLIGATION	C. TOTAL	D. UNLIQ BAL OF ADV
---------------	-----------	----------	----------------	------------	----------------------	----------	---------------------

DATE _____

LOCAL AGENCY _____

WAREHOUSE SITE _____

[illegible]



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 6

Evaluation, Training and Technical Assistance

Chapter 6	Management Evaluation	6.1
	Training and Technical Assistance	6.2
	Attachment 6.1 – Monitoring Review – CSFP Contract Agencies	



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Management Evaluation	Chapter:	6
		Section:	6.1
REFERENCES:	7 CFR 247	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To outline the management evaluation process the State will use with Commodity Supplemental Food Program contractors.

POLICY: Each local agency that contracts with the Missouri Department of Health and Senior Services will be monitored for compliance with Program regulations.

PROCEDURES:

- A. On-going monitoring is conducted by reviewing monthly reports, inventories, and status reports.
- B. At least annually, the State conducts a monitoring visit with CSFP contractors to review financial and property management, records and reports, commodity receipt, storage and distribution, certification procedures and documentation (including visits to distribution sites), nutrition education, outreach, referral, civil rights, and fair hearings.
- C. Monitoring activities are documented on CACFP Form 304 Monitoring Review – CSFP Contract Agencies (Attachment 6.1).
- D. The number of distribution and certification sites to be visited is 15% of all sites under the jurisdiction of the local agency, or 10 sites, which ever is less. Copies of page 6 of Attachment 6.1 are completed for each site visited. At each site, 25% of participant records or 25 records, whichever is less, will be reviewed.
- E. Areas of non-compliance will be noted and reviewed with the local agency representative. Within 30 calendar days of the review, a written report will be issued to the local agency.
- F. The local agency is required to follow-up any area of non-compliance with a written corrective action plan. The monitor reviews the corrective action plan to assure that the plan is feasible and complete. When appropriate, a closeout letter is sent to the local agency.
- G. If significant problems exist and or appropriate corrective actions are not taken, the local agency may be in non-compliance with the contract agreement between the SA and LA. Failure to comply with federal regulation and the contract scope of work could result in termination of the contract and from the CSFP.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Training and Technical Assistance	Chapter:	6
		Section:	6.2
REFERENCES:	7 CFR 247, SOW paragraph 3.1.1.5	Page:	1 of 1
		Revised:	8-2-04

PURPOSE: To outline the training, technical assistance and evaluation activities required of local agencies participating in the Commodity Supplemental Food Program.

POLICY: All local agency staff, volunteers and sub-agency staff shall receive appropriate training at least annually to assure that issuance of supplemental food is in accordance with FNS food package instructions and Program regulations. There shall be an evaluation component of such training and a mechanism for trainees to provide input.

PROCEDURES:

- A. Local agencies must implement a process for training and evaluation of all staff and volunteers involved in the CSFP. Training should be appropriate to the degree and frequency of an individual's involvement in the CSFP. For instance, the training and evaluation needs are different for the staff members who deal with the program on a daily basis, than for the distribution site staff and volunteers who might only be involved a few days a month, or for the volunteers who might only be involved once to help assemble food packages.
- B. The State provides technical assistance for local agency staff upon request. Annual seminars and teleconferences are provided for periodic updates. Resources and links are available at <http://www.dhss.mo.gov/csfp/>.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF COMMUNITY HEALTH
COMMUNITY FOOD AND NUTRITION ASSISTANCE
COMMODITY SUPPLEMENTAL FOOD PROGRAM
MONITORING REVIEW – CSFP CONTRACT AGENCIES

Attachment 6.1

SECTION I. GENERAL INFORMATION				
INSTITUTION NAME		CONTRACT NUMBER		
ADDRESS		DATE		
CONTACT PERSON		NUMBER OF FOOD STORAGE SITES UNDER JURISDICTION		
NUMBER OF DISTRIBUTION SITES UNDER JURISDICTION		NUMBER OF CERTIFICATION ONLY SITES UNDER JURISDICTION		
SECTION II. FINANCIAL MANAGEMENT (8.1, 8.2 & 247.9)* AND RECORDS (8.3 & 247.13)*				
	YES	NO	N/A	COMMENTS
1. Are the following items on file at the local non-profit contract agency				
a. Contract with MDHSS-CFNA.				
b. Copy of application and application materials.				
c. Copy of Policy and Procedure Manual.				
d. Copies of Record of Expenditures and Administrative Claims.				
e. Copies of agreements with all sub-distributing, certification, and food storage sites.				
f. Copies of FNS-53, USDA Multifood Requisitions, receiving documents and FNS-57, Report of Shipment Received Over, Short and/or Damaged.				
g. Copies of FNS-153, Monthly Report of the CSFP and Quarterly Administrative Financial Status Report.				
2. Is there a system in place to retain all records with respect to the Program for a period of 3 years following the end of applicable federal fiscal year?				
3. Are records maintained to support the Record of Expenditures and Administrative Claim?				
4. Is there an equipment inventory maintained for items purchased with CSFP funds?				
5. Does the contractor compare actual expenditures to approved budget on an on-going basis?				
6. Has the contractor submitted to MDHSS copies of agreements (1.e. above) and the equipment inventory (4. above).				

* Numbers from 1.1 through 12.2 refer to the Missouri CSFP Policy and Procedure Manual. Numbers from 247 through 250 refer to Parts within the Code of Federal Regulations, 7 CFR Chapter II.

ITEM	AMOUNT CLAIMED	REVIEWED VERIFIED
SALARIES AND FRINGE BENEFITS (Staff time documented? (SOW 3.4.3.3))		
TELEPHONE		
POSTAGE		
PRINTING		
OFFICE SUPPLIES (LIST)		
EQUIPMENT (LIST): PRIOR APPROVAL REQUIRED (Software > \$300 or Equipment > \$1,000)		
TRAVEL (STAFF TRAVEL)		
TRANSPORTATION COSTS		
SPACE AND FACILITIES		
OTHER COSTS (LIST)		
TOTAL DIRECT COSTS		
INDIRECT COSTS (MAY NOT EXCEED 8% OF DIRECT COSTS)		
GRAND TOTAL ALL COSTS		

SECTION III. RECEIPT, STORAGE AND DISTRIBUTION OF COMMODITIES (5.1-5.5, 247.4 & 250B)

	YES	NO	N/A	COMMENTS
1. Are adequate personnel and facilities available for the receipt, storage and distribution of CSFP Commodities?				
2. Is food organized in a manner to allow an accurate physical inventory count?				
a. Are the contents of assembled food packages included in the physical inventory count?				
b. Are the contents of undistributed food packages located at remote sites included in the physical inventory count?				
3. Is food stored on pallets, four inches from the wall?				
4. Is the warehouse kept clean and secure?				
5. Is the temperature kept at a level to assure retention of food quality?				
6. Is there a system in place to assure first-in, first-out?				
7. Are FNS-57, Report of Shipment Received Over, Short and/or Damaged completed when required?				
8. Are losses due to food demonstrations supported with participant sign-in log sheets?				

SECTION IV. CERTIFICATION (2.1-2.10 & 247.7) AND NUTRITION EDUCATION (4.1 & 247.8)

(See Participant Review Worksheet)

	YES	NO	N/A	COMMENTS
7. Do sub-contractors certify each applicant prior to the issuance of program benefits?				
8. Do sub-contractors maintain a waiting list of individuals who apply for the Program on-site when funding is not available to provide Program benefit?				
9. Do sub-contractors make notifications and referrals in accordance with Program policies and procedures?				
10. Is nutrition education thoroughly integrated into Program operations?				
11. Are Supplemental Foods used for food demonstrations documented on the FNS 153 and supported with participant sign-in log sheets?				

SECTION V. GENERAL ADMINISTRATION AND TECHNICAL ASSISTANCE (3.1-3.4, 6.1-6.2, 8.3, & 12.1)

1. Forms used by the contractor collect all required data in an efficient, effective manner.				
2. Contractor has an effective method for monitoring program records and providing feedback for noncompliance issues.				
3. Contractor has an effective method for managing caseload assignments to sub-contractors.				
4. Contractor has a procedure in place to notify sub-contractors of the contractor's policies and procedures.				
5. Contractor has adequate supervisory and operational personnel for effective management and monitoring.				
6. Training provided to sub-contractors under jurisdiction is provided in accordance to the management plan. Training was directly related to CSFP issues. Training is provided at least annually.				
7. Contractor has a system in place to:				
b. Evaluate the training needs of the subcontractors.				
c. Evaluate the training provided.				
d. Document date, location, topics, and names of participants.				
8. Does contractor provide technical assistance materials to sub-contractors such as newsletters, brochures, etc.? Is information accurate?				
9. Contractor has assigned a hearing officer and is prepared to conduct fair hearings if requested.				

SECTION VI. CORRECTIVE ACTIONS

1. Date of last monitoring.	2. Date of last organizational wide audit (OWA).	3. Was copy of OWA forwarded to MDHSS? <input type="checkbox"/> Yes <input type="checkbox"/> No
-----------------------------	--	--

4. Major findings from last monitoring visit.

5. Have findings been corrected? ☐ Yes ☐ No

If not, what problems continue?

SECTION VII. CIVIL RIGHTS (11.1 & 247.19)

FNS Instructions 113-2, Rev. 1. Indicate the racial/ethnic makeup of the enrollment at the time of this review:
(Report actual number of participant)

American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White
Within the above racial categories, indicate how many are of Hispanic or Latino ethnicity.				
1. Do admission procedures restrict enrollment by minority persons?		YES	NO	N/A
2. Do all materials used to publicize the CSFP to participants and the public contains the nondiscrimination statement and procedure for filing a complaint? (Attach copies.)				
3. Is the Civil Rights statement displayed?				
4. Is data on file to document the number of potential eligible participants for the geographic area served by the contractor by racial/ethnic category?				
5. Is the institution providing program information and compliance procedures on request in the appropriate translation?				
6. Are all services and facilities accessible and used routinely by all persons without regard to race, color, national origin, sex, or disability?				
7. Were there any verbal or written complaints of discrimination prior to this review?				
8. In the opinion of the reviewer, based on information contained in this review and personal observation, does the institution appear to be in compliance with Title VI of the Civil Rights Act of 1964? (If no, indicate on a separate sheet, 1) What the areas of noncompliance are, and 2) Recommendations for corrective action and follow-up.)				

SECTION VIII. EXIT CONFERENCE

1. Findings

2. Comments and/or Suggestions

3. Recommendations

PROGRAM REVIEWED BY

CSFP CONSULTANT

DATE

THIS REVIEW WAS DISCUSSED WITH

SIGNATURE



TITLE

DATE

DISTRIBUTION AND CERTIFICATION SITE VISIT WORKSHEET

GENERAL INFORMATION				
AGENCY NAME:	DATE:			
ADDRESS:	NUMBER OF FOOD PACKAGES DISTRIBUTED LAST MONTH			
CERTIFICATION PROCESS	YES	NO	N/A	COMMENTS
Do applications contain identifying information for each participant?				
Do applications contain dates-of-birth?				
Do applications contain SSN and household income information?				
Have applicants signed and dated the forms?				
Has the agency documented				
Proof of age/eligibility				
Residency				
Health and social services referral				
Has the certifier signed and entered his/her title on all forms?				
Is eligibility determination identified?				
Are categories correctly identified?				
Are dates of certification documented?				
Is there 20 days or less between date of application and determination of eligibility?				
If certification requests were denied, are applications kept on file?				
If waiting list maintained, is priority correctly assigned?				
DUAL PARTICIPATION				
Are all category PG, PP, BF, INF and CH reported on the Dual Participation Roster?				
NOTIFICATION REQUIREMENTS				
For persons found to be ineligible during the certification period, is there documentation of verbal or written notification of reasons and appeal rights at least 15 days in advance of termination.				
Is there documentation of verbal or written notification at least 15 days in advance of the expiration of the most recent certification periods?				
CERTIFICATION PERIODS				
Pregnant-for duration of pregnancy plus 6 weeks.				
Elderly, other women, children and infants – 6 months.				
NUTRITION EDUCATION				
Is the agency prepared nutrition education distributed effectively?				
If food demonstrations offered, is there documentation of attendees?				
FOOD DELIVERY				
Is there documentation of the quantities and types of food issued and for undistributed food packages?				
Are participants or proxy signatures and dates available verifying receipt of food each time it is issued?				
Are proxy authorizations available for all proxies used?				

PARTICIPANT REVIEW WORKSHEET

REVIEW 25% OF FOOD PACKAGES DISTRIBUTED LAST MONTH OR 25 WHICH EVER IS LESS.
ANNOTATE PROBLEMS. CHECK OR "X" IF NO PROBLEM NOTED.

PARTICIPANT NAME	INFORMATION MISSING	RECERTIFICATION OVER DUE	OTHER
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
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22.			
23.			
24.			
25			



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 7

State Planning

Chapter 7	State Planning – Public Comment	7.1
	State Plan – Outline	7.2



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	State Planning – Public Comment	Chapter:	7
		Section:	7.1
REFERENCES:	7 CFR 247.5(a)(8)	Page:	1 of 1
		Revised:	8-2-04

PURPOSE: To describe how local agencies, participants and other interested parties are involved in the development of the State Plan for the next fiscal year.

POLICY: Local agencies, participants and other interested parties may provide input and ideas for subsequent state plans on an on-going basis and during the annual period for public comment.

PROCEDURES:

- A. Local agencies are provided a copy of the approved State Plan annually and are encouraged to provide input and ideas on an on-going basis for incorporation into subsequent State Plans.
- B. Local agencies shall involve participants in the review of the State Plan and assure participant input is included in comments provided to the State regarding the State Plan.
- C. The State Plan shall be posted for a period of at least 30 days annually for public comment in September or October each year to solicit input and ideas for subsequent state plans from local agencies, participants, community groups, local health agencies, and other interested parties.



COMMODITY SUPPLEMENTAL FOOD PROGRAM POLICY AND PROCEDURE MANUAL

SUBJECT:	State Plan – Outline	Chapter:	7
		Section:	7.2
REFERENCES:	7 CFR 247.5(a)	Page:	1 of 2
		Revised:	8-2-04

PURPOSE: To outline the required components of the State Plan for the next fiscal year.

POLICY: The State Plan will be written in accordance with guidelines provided by the USDA regional office and the federal regulation.

PROCEDURES:

- A. The State Plan will include the names and addresses of each local agency that have an agreement with the state and each certification, food distribution and storage site under the jurisdiction of the local agency.
- B. The specific income criteria used in certifying persons (Sections 2.1 and 2.5) and the period of time covered by certifications (Section 2.8).
- C. A description of any plans for requesting program expansion or major redistribution of caseloads within the state during the fiscal year.
- D. A description of any plans for conducting outreach to ensure that all women, infants, and children, and elderly persons are aware of program benefits (Section 3.2)
- E. The plan for nutrition education including an evaluation component and procedures for participant input (Sections 4.1 and 4.2).
- F. A description of the manner in which foods are distributed to each local agency and to participants by the local agency (Section 5.4).
- G. A description of the manner in which the State agency plans to monitor each local agency (Section 6.1).
- H. A description of plans to involve local agencies, participants and other interested parties in the development of the State Plan for the next fiscal year (Section 7.1).
- I. A description of the financial management system (Section 8.1).
- J. A plan for the detection of dual participation within the jurisdiction of the State agency (Section 2.9).
- K. Procedures developed in accordance with 250.6(u) and provided to local agencies for reporting, processing and resolving complaints about supplemental foods (Section 9.1).



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: State Plan – Outline	Chapter: 7
	Section: 7.2
REFERENCES: 7 CFR 247.5(a)	Page: 2 of 2
	Revised: 8-2-04

- L. A description of the audit procedures (Section 10.1).
- M. A description of the procedures used to comply with the non-discrimination requirements and civil rights regulations (Section 11.1).
- N. A description of the fair hearing procedures for participants (Section 12.1).
- O. A description of plans for providing program benefits to elderly persons including:
 - a. An identification of the elderly population to be served, including documentation of the extent of need in the proposed service area.
 - b. A description of the means by which the State agency will meet the needs of the homebound elderly (Section 3.3).



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 8

Financial Management, Records and Reports

Chapter 8	Financial Management, Records and Reports	
	Financial Management Systems	8.1
	Administrative Costs	8.2
	Records and Reports	8.3
	Attachment 8.1 – Record of Expenditures & Administrative Claim	
	Attachment 8.2 – Request for Authorization of Equipment Purchase	
	Attachment 8.3 – Contractor Report Schedule	



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT:	Financial Management Systems	Chapter:	8
		Section:	8.1
REFERENCES:	7 CFR 247.9 through 247.14, US Treasury Department Circular 1075, and FMC 74-4	Page:	1 of 1
		Revised:	8-12-04

PURPOSE: To describe the financial management systems maintained to assure compliance with financial management regulations.

POLICY: There will be accurate, current and complete disclosure of the financial status of the Program in accordance with federal regulations.

PROCEDURES:

- A. The State of Missouri's SAM II system is a comprehensive, automated, financial management system that assures accurate and timely drawdown of federal funds. SAM II assigns each agency, bureau, program unique fund codes to which all purchases and expenditures for the program are coded. SAM II also provides access to a data warehouse of financial information that can be accessed almost any time throughout the month during regular business hours. The data warehouse provides timely reports of funds available and year to date expenditures.
- B. Local agencies are required by contract to follow state or federal procurement procedures. Both the State Agency and local agencies are required to maintain property inventory records for all equipment purchased in whole or in part with federal funds. State policy requires that property valued at \$1,000.00 or more purchased with state and/or federal funds must be inventoried and maintained on annual property inventory records at the state agency. In addition, these records are maintained on file at the respective agencies, and are monitored annually as part of the monitoring process.
- C. Funds are made available to each of the local CSFP agencies through contracts by the Missouri Department of Health and Senior Services. The contracts specify the services to be performed according to federal regulations and the state plan of operation. Contracts also specify the allocation of administrative funds. All payments for administrative funds are disbursed in the form of reimbursements for administrative costs incurred by the local agency under contract with the state and are recorded and monitored through SAM II. See Section 8.2 Administrative Costs.
- D. The local agencies are responsible for the cost of distributing the commodities from their location to recipients or other distribution sites. Contractors submit Attachment 8.1 – Record of Expenditures & Administrative Claim to request reimbursement of administrative costs incurred in the operation of the CSFP. Any claims containing expenses that do not reflect appropriate program expenditures will be adjusted pending further justification from the contractor.



COMMODITY SUPPLEMENTAL FOOD PROGRAM POLICY AND PROCEDURE MANUAL

SUBJECT: Administrative Costs	Chapter: 8
	Section: 8.2
REFERENCES: 7 CFR 247.11	Page: 1 of 2
	Revised: 8-12-04

PURPOSE: To provide guidance for the use of the Missouri Commodity Supplemental Food Program administrative funds.

POLICY: Funds provided to local agencies may be used to cover administrative costs identified in 7 CFR Part 247, amendments thereto, and in accordance with circulars and regulations referred to within 7 CFR Part 247.

PROCEDURES:

- A. Local agencies shall submit a budget annually projecting the amount of administrative funds to be expended based on project caseload authorizations.
- B. Examples of allowable costs include, but are not limited to:
 - 1. The cost of the certification process.
 - 2. The cost of nutrition education services provided to participants and parents and guardians of participants, and used for training local agency staff members.
 - 3. The cost of transporting food and of administering the food distribution system.
 - 4. The cost of interpreters and translators for Program materials.
 - 5. The cost of outreach services.
 - 6. The cost of audits and fair hearings.
 - 7. General administration including, but not limited to, personnel, warehousing, and insurance.
 - 8. The cost of monitoring and reviewing Program operations.
 - 9. The cost of transportation for participants to and from the local agency when the local agency has determined and documented the need for such assistance.
- C. Restrictions on allowable costs include:
 - 1. Local agencies wishing to use federal and/or state funds to purchase equipment valued at or above \$500.00 are required to obtain prior written approval from the



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Administrative Costs	Chapter: 8
	Section: 8.2
REFERENCES: 7 CFR 247.11	Page: 2 of 2
	Revised: 8-12-04

State Agency by submitting Attachment 8-2 – Request for Authorization of Equipment Purchases. The State Agency must obtain prior written approval from the USDA MPRO for equipment purchased in whole or in part with federal funds in excess of \$5,000.00.

2. Local agencies wishing to use federal and/or state funds to purchase Automatic Data Processing equipment and systems will be required to obtain prior written approval from the State Agency using Attachment 8-2 – Request for Authorization of Equipment Purchases.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Records and Reports	Chapter: 8
	Section: 8.3
REFERENCES: 7 CFR 247.13 and 7 CFR 250.6(r)	Page: 1 of 1
	Revised: 8-2-04

PURPOSE: To provide guidance for the Missouri Commodity Supplemental Food Program recordkeeping and reporting requirements.

POLICY: State and local agencies shall maintain accurate and complete records in accordance with federal and state regulations and policies and the contract scope of work.

PROCEDURES:

- A. All records and supporting documentation shall be retained for a period of 3 years following the end of the federal fiscal year to which the records pertain.
- B. All records shall be available during normal business hours for federal or state representatives to inspect, audit, and copy.
- C. To be acceptable for audit purposes, all financial and program performance reports shall be traceable to source documentation.
- D. Attachment 8.3 provides an outline of routine reports/forms and due dates. Following is a list of reports and appropriate policy references.
 1. Multi-food orders – See Section 5.1 and Attachments 5.1, 5.2, and 5.3.
 2. Form FNS-153 – See Section 5.5 and Attachments 5.4 and 5.5.
 3. Consignee Receipts – See Section 5.1.
 4. CACFP 302 Record of Expenditures and Administrative Claim – See Sections 8.1 and 8.2 and Attachment 8.2.
 5. Dual Participation Roster – See Section 2.10 and Attachment 2.9.
 6. Form FNS-191 Racial/Ethnic Group Participation – See Section 11.1 and Attachment 11.1.
 7. Form FNS-663 Commodity Acceptability Progress (CAP). Commodity acceptability information is collected at least once every 2 years. Currently, during even numbered years, report forms are provided to the State Agency by the USDA Regional Office and are due back to them by April 30.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF COMMUNITY HEALTH
COMMUNITY FOOD AND NUTRITION ASSISTANCE
COMMODITY SUPPLEMENTAL FOOD PROGRAM
RECORD OF EXPENDITURES AND ADMINISTRATIVE CLAIM

Attachment 8.1

NAME AND ADDRESS OF CONTRACTOR		CONTRACT NUMBER	
		EXPENDITURES FOR THE MONTH OF: (MM/YY)	
SALARIES AND FRINGE BENEFITS			
TELEPHONE			
POSTAGE			
PRINTING			
OFFICE SUPPLIES (LIST)			
EQUIPMENT (LIST): PRIOR APPROVAL REQUIRED			
TRAVEL (STAFF TRAVEL) ESTIMATED MILES PER MONTH x 12			
TRANSPORTATION COSTS			
SPACE AND FACILITIES			
OTHER COSTS (LIST)			
		TOTAL DIRECT COSTS	
INDIRECT COSTS (MAY NOT EXCEED 8% OF DIRECT COSTS)			
		GRAND TOTAL ALL COSTS	
SIGNATURE			
SIGNATURE BY THE AUTHORIZED REPRESENTATIVE CERTIFIES THAT: A. THE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND THAT RECORDS ARE AVAILABLE TO SUBSTANTIATE THE ABOVE EXPENDITURES. B. REIMBURSEMENT SHALL BE CLAIMED ONLY FOR ALLOWABLE PROGRAM COSTS. C. DEPARTMENT OFFICIALS MAY VERIFY INFORMATION. D. THE AUTHORIZED REPRESENTATIVE UNDERSTANDS THAT INFORMATION IS BEING GIVEN IN CONNECTION WITH THE RECEIPT OF FEDERAL FUNDS, AND THAT DELIBERATE MISREPRESENTATION MAY SUBJECT THE AUTHORIZED REPRESENTATIVE TO PROSECUTION UNDER APPLICABLE STATE AND FEDERAL CRIME STATUTES.			
SIGNATURE OF CSFP AUTHORIZED REPRESENTATIVE		TITLE	
SOCIAL SECURITY NUMBER		DATE	
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES USE ONLY			
APPROVED BY		DATE	
TITLE			

**REQUEST FOR AUTHORIZATION
of
EQUIPMENT PURCHASE**

The following information must be sent to the Missouri Department of Health and Senior Services, Community Food and Nutrition Assistance, P.O. Box 570, Jefferson City, MO 65102 at least 45 days before purchase/requisition.

This form shall be completed before the purchase of equipment exceeding the cost of \$500.00.
.....

I hereby request permission to purchase the following item from CSFP Program funds:

Item _____ Quoted Price _____ Vendor _____

Description _____

Funding source to be used:

_____ Purchase can be paid for out of the currently available CSFP funds within the agency, i.e. current budget.

_____ The purchase will require an increase of \$ _____ in the amount of administrative funds available.

Justification:

_____ Required for startup of operation.

_____ Required for the operation of an additional site.

_____ Required for use by additional program staff personnel.

_____ Equipment currently available must be surplused
I.D. Number _____ Condition _____

Provide narrative justification:

(Continue on reverse)

Basis for purchase:

_____ The item is to be used solely for the CSFP Program.

_____ Item purchase price is to be shared with _____ Program. Charge to each program is pro-rated on intended use.

Requested by _____
Name

Agency _____ Date

Approved by _____ Date _____
Name and Title

Contractor Report Schedule

Attachment 8.3

During the month of:	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
submit Multi-food order for	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov

via email by no later than date specified on form, usually the 15th.

During the month of:	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
submit FNS 153 for	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug

via email by no later than the 20th

Monthly fax (573-526-3679) completed Consignee Receipts as soon as possible after commodities are delivered.

**Monthly fax (573-526-3679) or mail CACFP 302 Record of Expenditures and Administrative Claim
by the 15th of each month for the previous month's expences.**

Semiannually submit Dual Participation Roster by the 15th of:	Jan		Jul
	for Jul - Dec		for Jan - Jun

Annually submit Form FNS-191 Racial/Ethnic Group Participation for the month of April by date to be announced.

Biannually submit Form FNS-663 Commodity Acceptability Progress (CAP) in accordance with guidance provided.

Schedule for monthly food orders and the FNS 153 from a different prespective:

Multi-food order for the month of	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
is due in the month of	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul

via email by no later than date specified on form, usually the 15th.

FNS 153 for the month of	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
is due by the 20th day of	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct

via email by no later than the 20th



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 9

Complaints

Chapter 9	Complaints	9.1
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COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Complaints	Chapter: 9
	Section: 9.1
REFERENCES: 7 CFR 247.5(a)(11) and 250.6(u)	Page: 1 of 1
	Revised: 8-2-04

PURPOSE: To outline the procedures for reporting, processing and resolving complaints about supplemental foods.

POLICY: Local agencies shall report, process and resolve complaints about supplemental foods in accordance with federal regulation.

PROCEDURES:

- A. During certification all participants and potential participants will be informed of their rights and obligations. Participants will be advised of the policy of non-discrimination and the procedure for filing a complaint if they believe they have been discriminated against.
- B. Depending on the nature of the complaint, i.e., food or services, the problem will be promptly investigated by the local agency and the person making the complaint will be notified of the results in writing. All persons making complaints must be notified of their right to a fair hearing so they may take further steps should their complaint not be satisfactorily resolved.
- C. Complaints suggesting a potential health hazard will be reported immediately to the Missouri Department of Health and Senior Services (MDHSS) by the local agency. MDHSS will immediately refer the matter to the Section for Environmental Public Health, the U.S. Department of Agriculture, and the local public health agency for prompt follow-up and resolution.
- D. All complaints will be documented along with appropriate and necessary corrective action. Follow-up on complaints will be conducted within 30 days of resolution of the complaint to assure that all problems have been corrected.
- E. The distributing agency, in cooperation with the local agency, will investigate promptly complaints received in connection with the distribution or use of donated foods, correct any irregularity, and inform the local agency and MDHSS. The distributing agency will maintain documentation on file of complaints and actions taken. MDHSS reserves the right to make investigations and has the final determination as to when a complaint has been properly adjusted. Serious irregularities will be reported to USDA by MDHSS in writing.



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 10

Audits

Chapter 10	Audits.....	10.1
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COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Audits	Chapter: 10
	Section: 10.1
REFERENCES: 7 CFR 247	Page: 1 of 1
	Revised: 8-2-04

PURPOSE: To outline audit requirements for the Commodity Supplemental Food Program.

POLICY: In compliance with federal regulations, all CSFP local agencies and the State Agency will be audited on an annual basis.

PROCEDURES:

- A. Audits will be conducted by an independent certified public accountant firm or the State Auditor's Office.
- B. Each audit will cover a period of not less than one year, and will cover the program year completed most recently, unless circumstances dictate the need for a more immediate audit.
- C. Audits will be tracked and follow-up provided by the MDHSS Office of Internal Audit.



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 11

Civil Rights

Chapter 11	Civil Rights	11.1
	Attachment 11.01 – ‘And Justice For All’ Poster	
	Attachment 11.02 – Form FNS 191 Racial/Ethnic Group Participation	



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Civil Rights	Chapter: 11
	Section: 11.1
REFERENCES: 7 CFR 247.19	Page: 1 of 2
	Revised: 8-19-04

PURPOSE: To outline actions required to assure Civil Rights requirements are met.

POLICY: State and local agencies will comply with Title VI of the Civil Rights Act of 1964 (P.L.88-352) and all requirements imposed by federal and state regulations.

PROCEDURES:

- A. Each local agency, distribution site, and certification site must post the “And Justice for All” poster (attachment 11.1) in a prominent location. This poster is also available on the web at <http://www.fns.usda.gov/cr/justice.htm> including translations into several different languages.
- B. Each local agency and/or each distributing agency shall collect the number of participants receiving food packages by racial/ethnic category during the month of April each year. This count may be collected as a manual head count of food package recipients, or may be collected from a review of certification forms. Counts must be submitted to the State Agency on attachment 11.2 – Form FNS-191 Racial/Ethnic Group Participation by Jun 20th each year.
- C. Written materials used to promote or advertise the program must contain the non-discrimination statement and procedures for filing a complaint. Use the wording located on the “And Justice for All” poster whenever possible.
- D. Where a significant proportion of the population of the area served by the local agency is composed of non-English or limited English speaking persons who speak the same language, program information, except certification forms, shall be provided in the appropriate language orally and in writing. Bilingual staff members or interpreters shall be available to serve these persons.
- E. Local agency compliance to Civil Rights requirements is reviewed during the annual management evaluation and documented on page 4 of 7 on the Monitoring Review form. See Section 6.1 and attachment 6.1.
- F. All complaints alleging discrimination based on race, sex, age, color, national origin or disability will be accepted, either verbally or written. In the event of a verbal complaint, a staff person of the local agency or of MDHSS will prepare a written report of the complaint on behalf of the participant.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Civil Rights	Chapter: 11
	Section: 11.1
REFERENCES: 7 CFR 247.19	Page: 2 of 2
	Revised: 8-19-04

- G. All complaints received by the local agency or MDHSS, either verbal or written, which allege discrimination shall be referred to the MDHSS Human Relations Officer III, in the Office of Personnel and to the USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410. A copy shall be sent to the USDA Mountain Plains Regional Office.

FOR ALL"

Para presentar una queja sobre discriminación, escriba a USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410, o llame al (202) 720-5964 (voz y TDD). USDA es un proveedor y empleador que ofrece oportunidad igual a todos.

U.S. DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

**RACIAL/ETHNIC GROUP PARTICIPATION
(WIC AND COMMODITY SUPPLEMENTAL FOOD PROGRAMS)**

FNS INSTRUCTION 113-2

WIC ☐ CSFP ☒

No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing regulation.

1. State
Missouri

2.

State # 1701

L/A #

NO. OF CLINICS

3. REPORTING

LOCAL AGENCY
NAME

ADDRESS

CITY

STATE MO ZIP CODE

TELEPHONE #

4. REPORTING YEAR: April _____

ACTUAL NUMBER OF PARTICIPANTS FOR THE MONTH OF APRIL

5. PARTICIPATION BY RACIAL/ETHNIC GROUP

^(A) WOMEN^(B) INFANTS^(C) CHILDREN^(D) ELDERLY^(E) TOTAL

a. Black, not of Hispanic origin.....

b. Hispanic.....

c. Asians or Pacific Islander.....

d. American Indian or Alaskan Native.....

e. White, not of Hispanic Origin.....

f. TOTALS

DATE

TITLE

SIGNATURE



COMMODITY SUPPLEMENTAL FOOD PROGRAM
POLICY AND PROCEDURE MANUAL

Chapter 12

Fair Hearings

Chapter 12	Fair Hearings	
	Fair Hearings for Individuals	12.1
	Fair Hearings for Local Agencies	12.2



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Fair Hearings for Individuals	Chapter: 12
	Section: 12.1
REFERENCES: 7 CFR 247.20 and Section 2.7 herein.	Page: 1 of 2
	Revised: 8-2-04

PURPOSE: To provide a hearing procedure through which any individual may appeal a State or local agency action that results in the denial or termination of benefits to the individual.

POLICY: Individuals have a right to a fair hearing and may appeal any decision made by the local agency regarding denial or termination from the CSFP.

PROCEDURES:

- A. Each program applicant or participant shall be informed of their right to a fair hearing in accordance with CSFP Policy and Procedure Section 2.7 – Fair Hearings.
- B. If a hearing is requested within the 15 day advance notice period by participants found ineligible at any time during a certification period, benefits will be continued or reinstated until a decision is reached or the certification period expires, whichever occurs first. Applicants, who are denied benefits at initial or subsequent certifications, shall not receive benefits while waiting for the hearing.
- C. All requests for fair hearings will be carried out by officials of the local agency. Local agencies are required to appoint a fair and impartial hearing officer for the purpose of conducting fair hearings. The local agency must schedule and conduct the hearing within 30 days from the date of the request for the hearing. Those requesting the hearing will be notified in writing no less than 10 days in advance of the time and place of the hearing.
- D. A request for a hearing will not be dismissed or denied unless:
 1. The request is not received within 60 days from the notice of adverse action; or
 2. The request is withdrawn in writing by the appellant; or
 3. The appellant or appellant's representative fails, without good cause, to appear at the scheduled hearing; or
 4. The appellant has been denied participation by a previous hearing and cannot provide evidence that circumstances relevant to program eligibility have changed in such a way as to justify a hearing.
- E. Hearings shall be conducted by an impartial official and in accordance with 7 CFR 247.20(g), (h), (i) and (j).



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Fair Hearings for Individuals	Chapter: 12
	Section: 12.1
REFERENCES: 7 CFR 247.20 and Section 2.7 herein.	Page: 2 of 2
	Revised: 8-2-04

- F. If the hearing decision is in favor of the appellant, and benefits were denied or discontinued, benefits shall begin immediately.
- G. If the decision concerns disqualification and is in favor of the agency, as soon as administratively feasible, the local agency shall terminate any continued benefits, as determined by the hearing officer.
- H. All records of the hearing shall be retained in accordance with program regulations and shall be available to the appellant or appropriate representative.



COMMODITY SUPPLEMENTAL FOOD PROGRAM

POLICY AND PROCEDURE MANUAL

SUBJECT: Fair Hearings for Local Agencies	Chapter: 12
	Section: 12.2
REFERENCES: 7 CFR 247.20	Page: 1 of 1
	Revised: 8-2-04

PURPOSE: To provide a hearing procedure through which any local agency may appeal a State agency action with monetary consequences for the local agency.

POLICY: Local agencies have a right to appeal any action by the State with monetary consequences.

PROCEDURES:

- A. All requested fair hearings will be conducted within 30 days from the date the department receives the request for a hearing. Those requesting a hearing will be notified in writing a minimum of ten days in advance of the time and place of the hearing and of the hearing procedure.
- B. Requests for fair hearings by local agencies to MDHSS will be conducted by an Attorney at Law under contract with the Missouri Department of Health and Senior Services to hear appeals of Child Nutrition Programs. Since this is a contractual relationship, executed solely for the purpose of presiding at hearings, hearings will be conducted in a fair and impartial manner. The hearing will be conducted within 30 days from the date of request for the hearing. Those requesting the hearing will be notified in writing no less than 10 days in advance of the time and place of the hearing.
- C. The appellant will be notified in writing of the decision of the Hearing Officer within 30 days of the hearing. All decisions shall be based on facts found in the hearing record, and the parties will be notified of their right to appeal the decision to the district court within 30 days. The Hearing Officer's decision is binding on the state and the local agency, and if in favor of the appellant, program benefits shall begin within 30 days.